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# INTERNATIONAL APPLICATION PUBLISHED UNDER THE PATENT COOPERATION TREATY (PCT)

(51) International Patent Classification <sup>6</sup> :		(11) International Publication Number: WO 96/4016
A61K 31/70	A1	(43) International Publication Date: 19 December 1996 (19.12.9
(21) International Application Number: PCT/US (22) International Filing Date: 6 June 1996 ( (30) Priority Data: 08/474,497 7 June 1995 (07.06.95)  (60) Parent Application or Grant (63) Related by Continuation US 08/474, Filed on 7 June 1995 (7 June 199	BB, BG, BR, BY, CA, CH, CN, CZ, CZ (Utility mode) DE, DE (Utility model), DK, DK (Utility model), EE, E (Utility model), ES, FI, FI (Utility model), GB, GE, HU, I IS, IP, KE, KG, KP, KR, KZ, LK, LR, LS, LT, LU, L' MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RI SD, SE, SG, SI, SK, SK (Utility model), TJ, TM, TR, T UA, UG, US, UZ, VN, ARIPO patent (KE, LS, MW, SI SZ, UG), Eurasian patent (AM, AZ, BY, KG, KZ, MD, RI TJ, TM), European patent (AT, BE, CH, DE, DK, ES, F FR, GB, GR, IE, IT, LU, MC, NL, PT, SE), OAPI pate P) (BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, T)	
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(54) Title: METHOD OF TREATMENT FOR LUNG D	ISEASI	2S USING ANTISENSE OLIGONUCLEOTIDES

#### (57) Abstract

A method of treating airway disease in a subject in need of such treatment is disclosed. The method comprises topically administering to the subject an antisense oligonucleotide in an amount effective to treat the ariway disease, where the antisense oligonucleotide is essentially free of adenosine. Pharmaceutical formulations are also disclosed.

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# METHOD OF TREATMENT FOR LUNG DISEASES USING ANTISENSE OLIGONUCLEOTIDES

This invention was made with Government support under grant RO1CA47217-06 from the National Cancer Institute. The Government has certain rights to this invention.

# Field of the Invention

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This application concerns a method of administering antisense oligonucleotides essentially free of adenosine as a treatment for lung diseases.

# Background of the Invention

oligonucleotides have received Antisense 10 considerable theoretical consideration as potentially useful pharmacologic agents in human disease. R. Wagner, (1994).However, practical 333-335 applications of these molecules in actual models of human 15 disease have been elusive. One important consideration in the pharmacologic application of these molecules is route of administration. Most experiments utilizing antisense oligonucleotides in vivo have involved direct application to limited regions of the brain (see C. 20 Wahlestedt, Trends in Pharmacological Sciences 15, 42-46 (1994); J. Lai et al., Neuroreport 5, 1049-1052 (1994); K. Standifer et al., Neuron 12, 805-810 (1994); Akabayashi et al., Brain Research 21, 55-61 (1994)), or to spinal fluid (see e.g. L. Tseng et al., European J. 25 Pharmacol. 258, R1-3 (1994); R. Raffa et al., European J. Pharmacol. 258, R5-7 (1994); F. Gillardon et al., Neurosci. 6, (1994)). 880-884 European J. applications have limited clinical utility due to their invasive nature.

systemic administration of antisense The oligonucleotides also poses significant problems with respect to pharmacologic application, not the least of which is the difficulty in targeting disease-involved 5 tissues. In contrast, the lung is an excellent potential target for antisense oligonucleotide application since it may be approached noninvasively and in a tissue-specific manner. Additionally, the lung represents an exceptional target for antisense ODN therapeutics ascompared to other 10 in vivo target organs or tissues, possibly because the lung is lined with surfactant which consists primarily of cationic lipids, well known to enhance cellular uptake of ODNs in other systems. However, the technology involved in delivering antisense agents to the lung remains relatively undeveloped, and potential problems related to the application of antisense agents to the lung remain unexplored.

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a purine which contributes to Adenosine, metabolism and participates in the intermediary 20 regulation of physiological activity, is a recognized This nucleoside is involved in many neuromodulator. local regulatory mechanisms, in particular at synapses in the CNS and at neuroeffector junctions in the periphery. In the CNS adenosine is known to inhibit the release of 25 a variety of neurotransmitters (noradrenaline, serotonin, GABA, acetylcholine, dopamine, glutamate, etc.), inhibit neurotransmission, depress neuronal induce spinal analgesia, and to possess anxiolytic properties (E.S. Ben-Soreket al., Archives of Internal 30 Medicine 153, 2701-2702 (1993)). In the heart, adenosine is known to slow atrioventricular (AV) conduction, suppress pacemaker activity, possess antiarrhythmic effects, modulate autonomic control, and to trigger the synthesis and release of prostaglandins. M.K. Church et J. Allergy & Clinical Immunology 92, 190-194 al., 35 It also possesses potent vasodilatory effects and modulates vascular tone. S.T. Holgate et al., Annals

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of the New York Academy of Sciences 629, 227-236 (1991).

As a therapeutic agent, adenosine has achieved considerable recent success as an antiarryhthmic agent in 5 the treatment of supraventricular tachycardia. See C.G. DeGroff and M.J. Silka, Journal of Pediatrics 125, 822-823 (1994); I. Drake et al., Human and Exp. Toxicol. 13, 263-265 (1994). However, many adverse effects of adenosine treatment have been reported in the literature. 10 See, e.g., A. Aggarwal, et al., Anesthesiology 79, 1132-1135 (1993); K.K. Burkhart, American J. Emergency Med. 11, 249-250 (1993); S.K. Srinivasan and P.J. Iversen, J. Clin. Lab. Analysis 9, 129-137 (1995); C.A. Stein et al., Pharmacology & Therapeutics 52, 365-384 (1991); B.B. 15 Fredholm et al., Pharmacological Reviews 46, 143-156 (1994); H. Saito, et al., Blood 66, 1233-1240 (1985). In asthmatic individuals show an particular, sensitivity to adenosine and adenosine monophosphate. See, J.H. Butterfield et al., Leukemia Res. 12, 345-355 20 (1988); CLONETICS: Normal Human Cell Systems Manual (1995); R.W. Wagner, Nature 372, 333-335 (1994).Serious, near-fatal induction of bronchospasm has occurred in asthmatic individuals administered adenosine for supraventricular tachycardia. See, S. Tabor, in: 25 Current Protocols in Molecular Biology, Vol. 1, Section 3.10.2 (John Wiley & Sons, 1987); J.H. Weiss, Id., at Section 6.2.2.

Similarly, asthmatic rabbits produced using the dust mite allergic rabbit model of human asthma also were shown to respond to aerosolized adenosine with marked bronchoconstriction, while non asthmatic rabbits showed no response. S. Ali et al., Agents Actions 37, 165-176 (1992). Recent work using this model system has suggested that adenosine-induced bronchoconstriction and bronchial hyperresponsiveness in asthma are mediated primarily through the stimulation of adenosine receptors. S. Ali et

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al., J. Pharmacol. Exp. Ther. 268, 1328-1334 (1994); S. Ali et al., Am. J. Physiol 266, L271-277 (1994).

Accordingly, adenosine is contraindicated in the lungs of asthmatics (who represent 10% of the adult 5 and 15% of the pediatric population in the United States). Since antisense ODNs are typically composed of all four base pairs, adenine, guanine, cytosine and thymidine, their breakdown products will produce free deoxyadenosine monophosphate in these hyperresponsive airways. Deoxyadenosine monophosphate differs from adenosine monophosphate only by the loss of an oxygen atom on the 3' carbon of the sugar moiety.

# Summary of the Invention

A first aspect of the present invention is a method of treating airway disease in a subject in need of such treatment. The method comprises administering an antisense oligonucleotide essentially free of adenosine to the lungs of the subject in an amount effective to treat the airway disease.

A second aspect of the present invention is a pharmaceutical composition, comprising, together in a pharmaceutically acceptable carrier, an antisense oligonucleotide essentially free of adenosine in an amount effective to treat an airway disease.

A third aspect of the present invention is the use of an antisense oligonucleotide essentially free of adenosine as given above for the preparation of a medicament for treating airway disease in a subject in need of such treatment.

# Brief Description of the Drawings

Figures 1-4 demonstrate that antisense oligonucleotides can be utilized as effective agents in the treatment or prevention of airway diseases.

Figure 1 illustrates the effects of  $A_1$  adenosine receptor antisense oligonucleotides and mismatch control

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antisense oligonucleotides on the dynamic compliance of the bronchial airway in a rabbit model. **Figure 2** illustrates the specificity of A<sub>1</sub> adenosine receptor antisense oligonucleotides as indicated by the A<sub>1</sub> and A<sub>2</sub> 5 adenosine receptor number present in A<sub>1</sub> adenosine receptor antisense oligonucleotide-treated airway tissue.

Figure 3 is a graphical representation illustrating that aerosolized deoxyadenosine monophosphate is a potent bronchoconstrictor in asthmatic pathways of allergic rabbits. Further, the figure shows that the effect of deoxyadenosine monophosphate is equipotent to that observed for adenosine monphosphate.

Figure 4 is a graphical representation illustrating that bronchoconstrictor effects occur with aerosolized phosphorothicate oligodeoxynucleotides containing adenosine, but not with oligodeoxynucleotides that are free of adenosine.

# Detailed Description of the Invention

Nucleotide sequences are presented herein by single strand only, in the 5' to 3' direction, from left to right. Nucleotides and amino acids are represented herein in the manner recommended by the IUPAC-IUB Biochemical Nomenclature Commission, or (for amino acids) by three letter code, in accordance with 37 CFR §1.822 and established usage. See, e.g., PatentIn User Manual, 99-102 (Nov. 1990) (U.S. Patent and Trademark Office, Office of the Assistant Commissioner for Patents, Washington, D.C. 20231); U.S. Patent No. 4,871,670 to Hudson et al. at Col. 3 lines 20-43 (applicants specifically intend that the disclosure of this and all other patent references cited herein be incorporated herein by reference).

The method of the present invention may be used to treat airway disease in a subject for any reason, with the intention that adenosine content of antisense compounds be eliminated or reduced so as to prevent its

liberation upon antisense degredation. Such liberation may cause serious, even life-threatening, bronchoconstriction in patients with hyperreactive airways. Examples of airway diseases that may be treated by the method of the present invention include cystic fibrosis, asthma, chronic obstructive pulmonary disease, bronchitis, and other airway diseases characterized by an inflammatory response.

Antisense oligonucleotides to the A<sub>1</sub> and A<sub>3</sub> 10 receptors are shown to be effective in the downregulation of A, or A, in the cell. One novel feature of this treatment, as compared to traditional treatments for bronchoconstriction. adenosine-induced administration is direct to the lungs. Additionally, a 15 receptor protein itself is reduced in amount, rather than merely interacting with a drug, and toxicity is reduced. Other proteins that may be targeted with antisense agents for the treatment of lung conditions include, but are not limited to: human A2a adenosine receptor, human A2b 20 adenosine receptor, human IgE receptor  $\beta$ , human Fcantigen, receptor CD23 human histidine epsilon decarboxylase, human beta tryptase, human tryptase-I, human prostaglandin D synthase, human cyclooxygenase-2, human eosinophil cationic protein, human eosinophil 25 derived neurotoxin, human eosinophil peroxidase, human adhesion molecule-1 (ICAM-1), human intercellular vascular cell adhesion molecule 1 (VCAM-1), human endothelial leukocyte adhesion molecule (ELAM-1), human P selectin, human endothelial monocyte activating factor, 30 human IL-3, human IL-4, human IL-5, human IL-6, human IL-8, human monocyte-derived neutrophil chemotactic factor, human neutrophil elastase, human neutrophil oxidase factor, human cathepsin G, human defensin 1, human defensin 3, human macrophage inflammatory protein-1alpha, human muscarinic acetylcholine receptor HM1, human muscarinic acetylcholine receptor HM3, human fibronectin, human GM-CSF, human tumor necrosis factor  $\alpha$ , human

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leukotriene C4 synthase, human major basic protein, and human endothelin 1. In these latter targets, and in target genes in general, it is particularly imperative to eliminate or reduce the adenosine content of the corresponding antisense oligonucleotide to prevent their breakdown products from liberating adenosine.

As used herein, the term "treat" or "treating" a lung disease refers to a treatment which decreases the likelihood that the subject administered such treatment will manifest symptoms of the lung disease. The term "downregulate" refers to inducing a decrease in production, secretion or availability (and thus a decrease in concentration) of the targeted intracellular protein.

The present invention is concerned primarily with the treatment of human subjects but may also be employed for the treatment of other mammalian subjects, such as dogs and cats, for veterinary purposes. Targeted proteins are preferably mammalian and more preferably of the same species as the subject being treated.

In general, "antisense" refers to the use of small, synthetic oligonucleotides, resembling singlestranded DNA, to inhibit gene expression by inhibiting function of the target messenger RNA 25 Milligan, J.F. et al., J. Med. Chem. 36(14), 1923-1937 In the present invention, inhibition of gene expression of the A<sub>1</sub> or A<sub>3</sub> adenosine receptor is desired. Gene expression is inhibited through hybridization to coding (sense) sequences in a specific messenger RNA 30 (mRNA) target by hydrogen bonding according to Watson-Crick base pairing rules. The mechanism of antisense the exogenously inhibition is that oligonucleotides decrease the mRNA or protein levels of target gene or cause changes in the 35 characteristics or shapes of the cells. Id. See also Helene, C. and Toulme, J., Biochim. Biophys. Acta 1049, 99-125 (1990); Cohen, J.S., Ed., Oligodeoxynucleotides as Antisense Inhibitors of Gene Expression; CRC Press:Boca Raton, FL (1987).

As used herein, "antisense oligonucleotide" is defined as a short sequence of synthetic nucleotides that (1) hybridizes to any coding sequence in an mRNA which codes for the targeted protein, according to hybridization conditions described below, and (2) upon hybridization causes a decrease in gene expression of the targeted protein.

10 The mRNA sequence of the A<sub>1</sub> or A<sub>3</sub> adenosine receptor is derived from the DNA base sequence of the gene expressing either the A, or A, adenosine receptor. The sequence of the genomic human A, adenosine receptor is known and is disclosed in U.S. Patent No. 5,320,963 to G. Stiles et al. The A3 adenosine receptor has been cloned, sequenced and expressed in rat (see F. Zhou et al., Proc. Nat'l Acad. Sci. USA 89:7432 (1992)) and human (see M.A. Jacobson et al., U.K. Patent Application No. 9304582.1 (1993)).Thus, antisense oligonucleotides 20 downregulate the production of the  $A_1$  or  $A_3$  adenosine receptor may be produced in accordance with standard techniques.

One aspect of this invention is an antisense oligonucleotide having a sequence capable of binding specifically with any sequence of an mRNA molecule which encodes an airway disease-associated protein so as to prevent translation of the mRNA molecule.

Chemical analogs of oligonucleotides (e.g., oligonucleotides in which the phosphodiester bonds have 30 been modified, e.g., to the methylphosphonate, the phosphotriester, the phosphorothicate, the phosphorodithicate, or the phosphoramidate, so as to render the oligonucleotide more stable in vivo) are also an aspect of the present invention. The naturally occurring phosphodiester linkages in oligonucleotides are susceptible to degradation by endogenously occurring cellular nucleases, while many analogous linkages are

highly resistant to nuclease degradation. See Milligan et al., and Cohen, J.S., supra. Protection from degradation can be achieved by use of a "3'-end cap" strategy by which nuclease-resistant linkages 5 substituted for phosphodiester linkages at the 3' end of the oligonucleotide. See Tidd, D.M. and Warenius, H.M., Br. J. Cancer 60, 343-350 (1989); Shaw, J.P. et al., Nucleic Acids Res. 19, 747-750 (1991). Phosphoramidates, phosphorothioates, and methylphosphonate linkages all 10 function adequately in this manner. More extensive modification of the phosphodiester backbone has been shown to impart stability and may allow for enhanced affinity and increased cellular permeation oligonucleotides. See Milligan, et al., supra. 15 different chemical strategies have been employed to replace the entire phosphodiester backbone with novel Id. Backbone analoques linkages. phosphorothicate, phosphorodithicate, methylphosphonate, phosphotriester, boranophosphate, phosphoramidate, 3'-thioformacetal, 5'-thioformacetal, 5'-20 formacetal, thioether, carbonate, 5'-N-carbamate, sulfate, sulfonate, sulfamate, sulfonamide, sulfone, sulfite, sulfoxide, sulfide, hydroxylamine, methylene(methylimino) (MMI) or methyleneoxy(methylimino) (MOMI) linkages. and methylphosphonate-modified 25 Phosphorothioate oligonucleotides are particularly preferred due to their availability through automated oligonucleotide synthesis. Where appropriate, the antisense oligonucleotides may be administered in the form of their pharmaceutically acceptable salts. 30

Antisense oligonucleotides may be of any suitable length (e.g., from about 10 to 60 nucleotides in length), depending on the particular target being bound and the mode of delivery thereof. Preferably the antisense oligonucleotide is directed to an mRNA region containing a junction between intron and exon. Where the antisense oligonucleotide is directed to an intron/exon

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junction, it may either entirely overlie the junction or may be sufficiently close to the junction to inhibit splicing out of the intervening exon during processing of precursor mRNA to mature mRNA (e.g., with the 3' or 5' terminus of the antisense oligonucleotide being is positioned within about, for example, 10, 5, 3, or 2 nucleotides of the intron/exon junction).

When practicing the present invention, the antisense nucleotides administered may be related in origin to the species to which it is administered. When treating humans, human antisense may be used if desired.

Pharmaceutical compositions comprising antisense oligonucleotide as given above effective to reduce expression of an A<sub>1</sub> or A<sub>3</sub> adenosine receptor by 15 passing through a cell membrane and binding specifically with mRNA encoding an A1 or A3 adenosine receptor in the cell so as to prevent its translation are another aspect of the present invention. Such compositions are provided in a suitable pharmaceutically acceptable carrier (e.g., 20 sterile pyrogen-free saline solution). The antisense oligonucleotides may be formulated with a hydrophobic carrier capable of passing through a cell membrane (e.g., liposome, with the liposomes carried pharmaceutically acceptable aqueous carrier). The oligonucleotides may also be coupled to a substance which inactivates mRNA. such as a ribozyme. oligonucleotides may be administered to a subject to inhibit the activation of  $A_1$  or  $A_2$  adenosine receptors, which subject is in need of such treatment for any of the discussed herein. Furthermore, reasons pharmaceutical formulation may also contain chimeric molecules comprising antisense oligonucleotides attached to molecules which are known to be internalized by cells. These oligonucleotide conjugates utilize cellular uptake concentrations increase cellular 35 pathways to oligonucleotides. Examples of macromolecules used in this manner include transferrin, asialoglycoprotein

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(bound to oligonucleotides via polylysine) and streptavidin.

In the pharmaceutical formulation the antisense compound may be contained within a lipid particle or such as a liposome or microcrystal. particles may be of any suitable structure, such as unilamellar or plurilamellar, so long as the antisense oligonucleotide is contained therein. Positively charged such as N-[1-(2,3-dioleoyloxi)propyl]-N,N,N-10 trimethyl-ammoniumethylsulfate, "DOTAP," orparticularly preferred for such particles and vesicles. The preparation of such lipid particles is well known. See, e.g., U.S. Patent Nos. 4,880,635 to Janoff et al.; 4,906,477 to Kurono et al.; 4,911,928 to Wallach; 15 4,917,951 to Wallach; 4,920,016 to Allen et al.;4,921,757 to Wheatley et al.; etc.

Subjects may be administered the active composition by any means which transports the antisense nucleotide composition to the lung. The antisense compounds disclosed herein may be administered to the lungs of a patient by any suitable means, but are preferably administered by generating an aerosol comprised of respirable particles, the respirable particles comprised of the antisense compound, which particles the subject inhales. The respirable particles may be liquid or solid. The particles may optionally contain other therapeutic ingredients.

Particles comprised of antisense compound for practicing the present invention should include particles of respirable size: that is, particles of a size sufficiently small to pass through the mouth and larynx upon inhalation and into the bronchi and alveoli of the lungs. In general, particles ranging from about .5 to 10 microns in size are respirable. Particles of non-respirable size which are included in the aerosol tend to deposit in the throat and be swallowed, and the quantity of non-respirable particles in the aerosol is preferably

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minimized. For nasal administration, a particle size in the range of 10-500  $\mu m$  is preferred to ensure retention in the nasal cavity.

Liquid pharmaceutical compositions of active compound for producing an aerosol can be prepared by combining the antisense compound with a suitable vehicle, such as sterile pyrogen free water. Other therapeutic compounds may optionally be included.

Solid particulate compositions containing respirable dry particles of micronized antisense compound 10 may be prepared by grinding dry antisense compound with a mortar and pestle, and then passing the micronized composition through a 400 mesh screen to break up or separate out large agglomerates. A solid particulate composition comprised of the antisense compound may 15 optionally contain a dispersant which serves facilitate the formation of an aerosol. A suitable dispersant is lactose, which may be blended with the antisense compound in any suitable ratio (e.g., a 1 to 1 ratio by weight). Again, other therapeutic compounds may 20 also be included.

The dosage of the antisense compound administered will depend upon the disease being treated, the condition of the subject, the particular formulation, 25 the route of administration, the timing of administration to subject, In general, intracellular concentrations of the oligonucleotide of from .05 to 50  $\mu M$ , or more particularly .2 to 5  $\mu M$ , are desired. administration to a subject such as a human, a dosage of 30 from about .01, .1, or 1 mg/Kg up to 50, 100, or 150 mg/Kg or more is typically employed. Depending on the solubility of the particular formulation of active compound administered, the daily dose may be divided several unit dose administrations. among one orAdministration of the antisense compounds may be carried out therapeutically (i.e., as a rescue treatment) or prophylactically.

Aerosols of liquid particles comprising the antisense compound may be produced by any suitable means, such as with a nebulizer. See, e.g., U.S. Patent No. 4,501,729. Nebulizers are commercially available devices 5 which transform solutions or suspensions of the active ingredient into a therapeutic aerosol mist either by means of acceleration of a compressed gas, typically air or oxygen, through a narrow venturi orifice or by means of ultrasonic agitation. Suitable formulations for use 10 in nebulizers consist of the active ingredient in a liquid carrier, the active ingredient comprising up to 40% w/w of the formulation, but preferably less than 20% w/w. the carrier is typically water or a dilute aqueous alcoholic solution, preferably made isotonic with body 15 fluids by the addition of, for example, sodium chloride. Optional additives include preservatives formulation is not prepared sterile, for example, methyl hydroxybenzoate, antioxidants, flavoring agents, volatile oils, buffering agents and surfactants.

Aerosols of solid particles comprising the active compound may likewise be produced with any solid medicament aerosol generator. particulate generators for administering solid particulate medicaments to a subject produce particles which are 25 respirable, as explained above, and generate a volume of aerosol containing a predetermined metered dose of a medicament at a rate suitable for human administration. One illustrative type of solid particulate aerosol generator is an insufflator. Suitable formulations for 30 administration by insufflation include finely comminuted powders which may be delivered by means of an insufflator or taken into the nasal cavity in the manner of a snuff. In the insufflator, the powder (e.g., a metered dose thereof effective to carry out the treatments described 35 herein) is contained in capsules or cartridges, typically made of gelatin or plastic, which are either pierced or opened in situ and the powder delivered by air drawn

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through the device upon inhalation or by means of a manually-operated pump. The powder employed in the insufflator consists either solely of the ingredient or of a powder blend comprising the active 5 ingredient, a suitable powder diluent, such as lactose, and an optional surfactant. The active ingredient typically comprises from 0.1 to 100 w/w of formulation. A second type of illustrative aerosol generator comprises a metered dose inhaler. Metered dose 10 inhalers are pressurized aerosol dispensers, typically containing a suspension or solution formulation of the active ingredient in a liquified propellant. During use these devices discharge the formulation through a valve adapted to deliver a metered volume, typically from 10 to 15 150  $\mu$ l, to produce a fine particle spray containing the active ingredient. Suitable propellants include certain chlorofluorocarbon compounds, for example, dichlorodifluoromethane, trichlorofluoromethane, dichlorotetrafluoroethane and mixtures thereof. 20 formulation may additionally contain one or more cosolvents, for example, ethanol, surfactants, such as oleic acid or sorbitan trioleate, antioxidants and suitable flavoring agents.

The aerosol, whether formed from solid or liquid particles, may be produced by the aerosol generator at a rate of from about 10 to 150 liters per minute, more preferably from about 30 to 150 liters per minute, and most preferably about 60 liters per minute. Aerosols containing greater amounts of medicament may be administered more rapidly.

The following examples are provided to illustrate the present invention, and should not be construed as limiting thereon. In these examples,  $\mu M$  means micromolar, mL means milliliters,  $\mu M$  means micrometers, mm means millimeters, cm means centimeters, °C means degrees Celsius,  $\mu M$  means micrograms, mg means

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milligrams, g means grams, kg means kilograms, M means molar, and h means hours.

#### EXAMPLE 1

# Design and synthesis of antisense oligonucleotides

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design of antisense oligonucleotides against the A<sub>1</sub> and A<sub>3</sub> adenosine receptors may require the solution of the complex secondary structure of the target  $A_1$  receptor mRNA and the target  $A_3$  receptor mRNA. After generating this structure, antisense nucleotides are 10 designed which target regions of mRNA which might be construed to confer functional activity or stability to the mRNA and which optimally may overlap the initiation Other target sites are readily usable. demonstration of specificity of the antisense effect, 15 other oligonucleotides not totally complementary to the mRNA, but containing identical nucleotide compositions on a w/w basis, are included as controls in antisense experiments.

Adenosine A, receptor mRNA secondary structure 20 was analyzed and used as described above to design a phosphorothioate antisense oligonucleotide. The antisense oligonucleotide which was synthesized was designated HAdAlAS and had the following sequence:

#### 5'-GAT GGA GGG CGG CAT GGC GGG-3' (SEQ ID NO:1)

As a control, a mismatched phosphorothicate antisense nucleotide designated HAdAlMM was synthesized with the following sequence:

## 5'-GTA GCA GGC GGG GAT GGG GGC-3' (SEQ ID NO:2)

Each oligonucleotide had identical base content and 30 general sequence structure. Homology searches in GENBANK (release 85.0) and EMBL (release 40.0) indicated that the antisense oligonucleotide was specific for the human and rabbit adenosine A<sub>1</sub> receptor genes, and that

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mismatched control was not a candidate for hybridization with any known gene sequence.

Adenosine A<sub>3</sub> receptor mRNA secondary structure was similarly analyzed and used as described above to design two phosphorothioate antisense oligonucleotides. The first antisense oligonucleotide (HAdA3AS1) synthesized had the following sequence:

5'-GTT GTT GGG CAT CTT GCC-3' (SEQ ID NO:3)

As a control, a mismatched phosphorothicate antisense 10 oligonucleotide (HAdA3MM1) was synthesized, having the following sequence:

5'-GTA CTT GCG GAT CTA GGC-3' (SEQ ID NO:4)

A second phosphorothicate antisense oligonucleotide (HAdA3AS2) was also designed and synthesized, having the following sequence:

5'-GTG GGC CTA GCT CTC GCC-3' (SEQ ID NO:5)

Its control oligonucleotide (HAdA3MM2) had the sequence:

5'-GTC GGG GTA CCT GTC GGC-3' (SEQ ID NO:6)

Phosphorothicate oligonucleotides were 20 synthesized on an Applied Biosystems Model 396 Oligonucleotide Synthesizer, and purified using NENSORB chromatography (DuPont, MD).

#### EXAMPLE 2

Testing of Al-Adenosine Receptor

25 <u>Antisense Oligonucleotides in vitro</u>

The antisense oligonucleotide against the human  $A_1$  receptor (SEQ ID NO:1) described above was tested for

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efficacy in an *in vitro* model utilizing lung adenocarcinoma cells HTB-54. HTB-54 lung adenocarcinoma cells were demonstrated to express the A<sub>1</sub> adenosine receptor using standard northern blotting procedures and 5 receptor probes designed and synthesized in the laboratory.

HTB-54 human lung adenocarcinoma cells (106/100 mm tissue culture dish) were exposed to 5.0  $\mu$ M HAdAlAS or HAdalMM for 24 hours, with a fresh change of media and 10 oligonucleotides after 12 hours of incubation. Following 24 hour exposure to the oligonucleotides, cells were harvested and their RNA extracted by standard procedures. A 21-mer probe corresponding to the region of mRNA targeted by the antisense (and therefore having the same 15 sequence as the antisense, but not phosphorothioated) was synthesized and used to probe northern blots of RNA prepared from HAdalAS-treated, HAdalMM-treated and non-These blots showed clearly that treated HTB-54 cells. HAdalas but not HAdalam effectively reduced human 20 adenosine receptor mRNA by >50%. This result showed that HAdAlAS is a good candidate for an anti-asthma drug since it depletes intracellular mRNA for the adenosine A1 receptor, which is involved in asthma.

### EXAMPLE 3

# Efficacy of A<sub>1</sub>-Adenosine Receptor Antisense Oligonucleotides in vivo

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A fortuitous homology between the rabbit and human DNA sequences within the adenosine  $A_1$  gene overlapping the initiation codon permitted the use of the phosphorothicate antisense oligonucleotides initially designed for use against the human adenosine  $A_1$  receptor in a rabbit model.

Neonatal New Zealand white Pasteurella-free rabbits were immunized intraperitoneally within 24 hours of birth with 312 antigen units/mL house dustmite (D. farinae) extract (Berkeley Biologicals, Berkeley, CA),

mixed with 10% kaolin. Immunizations were repeated weekly for the first month and then biweekly for the next 2 months. At 3-4 months of age, eight sensitized rabbits were anesthetized and relaxed with a mixture of ketamine bydrochloride (44 mg/kg) and acepromazine maleate (0.4 mg/kg) administered intramuscularly.

rabbits were then laid supine comfortable position on a small molded, padded animal board and intubated with a 4.0-mm intratracheal tube 10 (Mallinkrodt, Inc., Glens Falls, NY). A polyethylene catheter of external diameter 2.4 mm with an attached latex balloon was passed into the esophagus maintained at the same distance (approximately 16 cm) the mouth throughout the experiments. The 15 intratracheal tube was attached to a heated Fleisch pneumotachograph (size 00; DOM Medical, Richmond, VA), and flow was measured using a Validyne differential pressure transducer (Model DP-45161927; Validyne Engineering Corp., Northridge, CA) driven by a Gould 20 carrier amplifier (Model 11-4113; Gould Electronic, Cleveland, OH). The esophageal balloon was attached to one side of the differential pressure transducer, and the outflow of the intratracheal tube was connected to the opposite side of the pressure transducer to allow 25 recording of transpulmonary pressure. Flow was integrated to give a continuous tidal volume, measurements of total lung resistance (RL) and dynamic compliance (Cdyn) were calculated at isovolumetric and flow zero points, respectively, using an automated respiratory analyzer (Model 6; Buxco, Sharon, CT).

Animals were randomized and on Day pretreatment values for PC50 were obtained aerosolized adenosine. Antisense (HAdAlAS) or mismatched control (HAdA1MM) oligonucleotides were dissolved in sterile physiological saline at a concentration of 5000 (5 mg) per 1.0 ml. Animals were subsequently administered the aerosolized antisense or mismatch

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oligonucleotide via the intratracheal tube (approximately 5000 μg in a volume of 1.0 ml), twice daily for two days.

Aerosols of either saline, adenosine, or antisense or mismatch oligonucleotides were generated by an ultrasonic nebulizer (DeVilbiliss, Somerset, PA), producing aerosol droplets 80% of which were smaller than 5 μm in diameter.

In the first arm of the experiment, four randomly selected allergic rabbits were administered antisense oligonucleotide and four the mismatched control oligonucleotide. On the morning of the third day, PC50 values (the concentration of aerosolized adenosine in mg/ml required to reduce the dynamic compliance of the bronchial airway 50% from the baseline value) were obtained and compared to PC50 values obtained for these animals prior to exposure to oligonucleotide.

Following a 1 week interval, animals were crossed over, with those previously administered mismatch oligonucleotide now administered antisense oligonucleotide, and those previously treated with 20 antisense oligonucleotide now administered mismatch Treatment methods and oligonucleotide. control measurements were identical to those employed in the first arm of the experiment. It should be noted that in the eight animals treated with antisense six of 25 oligonucleotide, adenosine-induced bronchoconstriction could not be obtained up to the limit of solubility of adenosine, 20 mg/ml. For the purpose of calculation, PC50 values for these animals were set at 20 mg/ml. values given therefore represent a minimum figure for Actual effectiveness was 30 antisense effectiveness. The results of this experiment are illustrated in both Figure 1 and Table 1.

5

TABLE 1. EFFECTS OF ADENOSINE A, RECEPTOR ANTISENSE OLIGONUCLEOTIDE UPON PC50 VALUES IN ASTHMATIC RABBITS.

Mismatch Control

A<sub>1</sub> receptor Antisense oligonucleotide

Pre	Post	Pre	Post oligonucleotide
oligonucleotide	oligonucleotide	oligonucleotide	
3.56 ± 1.02	5.16 ± 1.93	2.36 ± 0.68	>19.5 ± 0.34**

Results are presented as the mean  $(N = 8) \pm SEM$ . Significance was determined by repeated-measures analysis of variance (ANOVA), and Tukey's protected t test. \*\*Significantly different from all other groups, P < 0.01.

In both arms of the experiment, animals receiving the antisense oligonucleotide showed an order of magnitude increase in the dose of aerosolized adenosine required to reduce dynamic compliance of the lung by 50%. No effect of the mismatched control oligonucleotide upon PC50 values was observed. No toxicity was observed in any animal receiving either antisense or control inhaled oligonucleotide.

These results show clearly that the lung has exceptional potential as a target for antisense 20 oligonucleotide-based therapeutic intervention in lung They further show, in a model system which disease. closely resembles human asthma, that downregulation of the adenosine A1 receptor largely eliminates adenosinebronchoconstriction in asthmatic induced Bronchial hyperresponsiveness in the allergic rabbit model of human asthma is an excellent endpoint for antisense intervention since the tissues involved in this response lie near to the point of contact with aerosolized oligonucleotides, and the model closely 30 simulates an important human disease.

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#### EXAMPLE 4

# Specificity of A<sub>1</sub>-adenosine receptor Antisense oligonucleotide

At the conclusion of the crossover experiment of Example 3, airway muscle from all rabbits was quantitatively analyzed for adenosine A<sub>1</sub> receptor number. As a control for the specificity of the antisense oligonucleotide, adenosine A<sub>2</sub> receptors, which should not have been affected, were also quantified.

Airway smooth muscle tissue was dissected from 10 each rabbit and a membrane fraction prepared according to described methods (J. Kleinstein and H. Glossmann, Naunyn-Schmiedeberg's Arch. Pharmacol. 305, 191-200 (1978), with slight modifications. Crude plasma membrane 15 preparations were stored at - 70°C until the time of assay. Protein content was determined by the method of Bradford (M. Bradford, Anal. Biochem. 72, (1976)). Frozen plasma membranes were thawed at room temperature and were incubated with 0.2 U/ml adenosine 20 deaminase for 30 minutes at 37°C to remove endogenous The binding of [3H] DPCPX (A1 receptoradenosine. specific) or [3H] CGS-21680 (A2 receptor-specific) was measured as previously described. S. Ali et al., J. Pharmacol. Exp. Ther. 268, 1328-1334 (1994); S. Ali et 25 al., Am. J. Physiol 266, L271-277 (1994).

As illustrated in both Figure 2 and Table 2, antisense adenosine Α, with animals treated oligonucleotide in the crossover experiment had a nearly 75% decrease in A<sub>1</sub> receptor number compared to controls, 30 as assayed by specific binding of the  $A_1$ -specific There was no change in adenosine  $A_2$ antagonist DPCPX. receptor number, as assayed by specific binding of the A2 2-[p-(2-carboxyethyl)agonist receptor-specific phenethylamino]-5'-(N-ethylcarboxamido) adenosine (CGS-35 21680).

5

TABLE 2. SPECIFICITY OF ACTION OF ADENOSINE  $\mathbf{A}_1$  RECEPTOR ANTISENSE OLIGONUCLEOTIDE.

Mismatch Control A, Antisense oligonucleotide oligonucleotide

A <sub>1</sub> -Specific Binding	1105 ± 48**	293 ± 18
A <sub>2</sub> -Specific Binding	302 ± 22	442 ± 171

Results are presented as the mean  $(N = 8) \pm SEM$ . Significance was determined by repeated-measures analysis of variance (ANOVA), and Tukey's protected t test. \*\*Significantly different from mismatch control, P < 0.01.

The above demonstrates the effectiveness of antisense oligonucleotides in treating airway diseases. Since the antisense oligonucleotides described above eliminate the receptor systems responsible for adenosine-mediated bronchoconstriction, it may be less imperative to eliminate adenosine from them. However, it would be preferable to eliminate adenosine from even these oligonucleotides. Examples of such adenosine-free oligonucleotides are provided below in Example 5.

#### EXAMPLE 5

The method of the present invention is also practiced with the following antisense oligonucleotides targeted to their corresponding proteins, in essentially the same manner as given above, for the treatment of various conditions in the lungs. Described below is a series of antisense oligonucleotides targetting the mRNA of proteins involved in inflammation. Adenosine has been eliminated from their nucleotide content to prevent its liberation during degradation.

In the following, the first sequence provided after the name of the targeted inflammation-involved protein is the antisense sequence that targets the initiation codon, wherein the naturally-occurring adenosine is substituted by one of the following: (1) a universal base that is not adenosine; (2) a adenosine analog that lacks the ability to bind to the adenosine A1

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and/or A3 receptors; or (3) a "spacer." Any one of these
three is represented in the sequence as the letter "B,"
recognized by the IUPAC-IUB Nomenclature Commission as
"not-A." See Patentin User Manual, p.99 (November 1990).
5 Listed following the antisense sequence targeted against

the initation codon are additional antisense oligonucleotide sequences directed against other portions of the mRNA of the targeted protein. These additional sequences are the "des-adenosine antisense sequences," in that they do not contain adenosine within the sequence.

Fragments of the following sequences that are at least ten, and more preferably at least twelve, nucleotides in length are also an aspect of the presnet invention and are useful in carrying out the present invention. Fragments set forth below that span multiple lines of test indicate "5'-" at the beginning thereof, and "-3'" at the end thereof.

### Human Al adenosine receptor:

5'-GGC GGC CTG GBB BGC TGB GBT GGB GGG CGG CBT

GGC GGG CBC BGG CTG GGC-3'

des-adenosine antisense sequences: TTT TCC TTC CTT TGT CTC TCT TC

GCT CCC GGC TGC CTG

CTC GGC CGT GCG GCT CTG TCG CTC CCG GT

25 CCG CCG CCC TCC GGG GGG TC

TGC TGC CGT TGG CTG CCC

CTT CTG CGG GTC GCC GG

TGC TGG GCT TGT GGC

GGC CTC TCT TCT GGG

30 CCT GGT CCC TCC GT

GGT GGC TCC TCT GC

GCT TGG TCC TGG GGC TGC

TGC TCT CCT CTC CTT

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	Human	A2a	adenosine receptor: GTBCBCCGBGGGGCCCBTGBTGGGCBTGCCBCBGBCGBCBGGC
5			des-adenosine antisense sequences: HSA2ARECAS1: TGC TTT TCT TTT CTG GGC CTC (SEQ ID NO:7) HSA2ARECAS2: TGT GGT CTG TTT TTT TCT G HSA2ARECAS3: GCC CTG CTG GGG CGC TCT CC
10			HSA2ARECAS4: GCC GCC CGC CTG GCT CCC HSA2ARECAS5: GGB GCC CBT GBT GGG CBT GCC HSA2ARECAS6: GTG GTT CTT GCC CTC CTT TGG CTG HSA2ARECAS7: CCG TGC CCG CTC CCC GGC HSA2ARECAS8: CTC CTG GCG GGT GGC CGT TG HSA2ARECAS9: GGC CCG TGT TCC CCT GGG
15			HSA2ARECAS10: GCC TGG GGC TCC CTT CTC TC HSA2ARECAS11: GCC CTT CTT GCT GGG CCT C HSA2ARECAS12: TGC TGC TGC TGC TGT GGC CCCC
	Human	A2b	adenosine receptor: 5'-BCBGCGCGTCCTGTGTCTCCBGCBGCBTGGCC GGGCCBGCTGGGCCCC-3'
20			des-adenosine antisense sequences: HSA2BRECAS1: 5'-GGC GCC GTG CCG CGT CTT GGT GGC GGC GG-3' (SEQ ID NO:8) HSA2BRECAS2: 5'-GTT CGC GCC CGC GCG GGG CCC CTC
25			CGG TCC-3' HSA2BRECAS3: 5'-TTG GCC CGC GCG CCC GCC CGT CTC GGG CTG GGC GG-3' HSA2BRECAS4: CGG GTC GGG GCC CCC CGC GGC C HSA2BRECAS5: 5'-GCC TCG GGG CTG GGG CGC TGG TGG
30			CCG GG-3' HSA2BRECAS6: CCG CGC CTC CGC CTG CCG CTT CTG HSA2BRECAS7: GCT GGG CCC CGG GCG CCC CCT HSA2BRECAS8: CCC CTC TTG CTC GGG TCC CCG TG
35	Human	<b>A</b> 3 a	adenosine receptor 5'-BCB GBG CBG TGC TGT TGT TGG GCB TCT TGC CTT CCC BGG G-3'
			des-adenosine antisense oligonucleotides: CCC TTT TCT GGT GGG GTG
			GTG CTG TTG GGC
			TTT CTT CTG TTC CC
40	Human	IgE	receptor β: 5'-BTTTGCTCTCTBTTBCTTTCTGTGTCCBTTTTTT CBTTBBCCGBGCTGT-3'
45			des-adenosine antisense sequences: HUMIgE $\beta$ rAS1: TTT CCC CTG GGT CTT CC (SEQ ID NO:9) HUMIgE $\beta$ rAS2: CTC CTG CTC TTT TTT C

45

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Human	Fc-epsilon	receptor	CD23	antigen	(IgE	receptor)	:
	5'-TCT(	CTGBBTBTT	BCCT:	CCTCCBTC	GCGGT	CCTGCTT	
	GGB?	TTCTCCCGB-	-3′				

des-adenosine antisense sequences:

HUMIgErCD23AS1: GCC TGT GTC TGT CCT (SEQ

ID NO:10)

HUMIgErCD23AS2: GCT TCG TTC CTC TCG TTC

HUMIgErCD23AS3: CTG CTT GGT GCC CTT GCC G

HUMIgErCD23AS4: GTC CTC CTC CGG GCT GTG G

HUMIGERCD23AS4: GTC CTG CTC CGG GCT GTG G

HUMIGERCD23AS5: 5'-GTC GTG GCC CTG GCT CCG

GCTGGT GGG CTC CCC TGG-3'

HUMIGERCD23AS6: CCT TCG CTG GCT GGC GGC GTG C HUMIGERCD23AS7: GGG TCT TGC TCT GGG CCT GGC TGT HUMIGERCD23AS8: GGC CGT GGT TGG GGG TCT TC HUMIGERCD23AS9: GCT GCC TCC GTT TGG GTG GC

### Human IgE receptor, α subunit:

5'-BCBGTBGBGTBGGGGBTTCCBTGGCBGGBGCCBTC
TTCTTCBTGGBCTCC-3'

and

5'-TTC BBG GBG BCC TTB GGT TTC TGB GGG BCT GCT BBC BCG CCB TCT GGB GC-3'

des-adenosine antisense sequences: HUMIgEraAS1: GCCTTTCCTGGTTCTCTT (SEQ ID NO:11)

GTT GTT TTT GGG GTT TGG CTT

## 25 Human IgE receptor, Fc epsilon R:

5'-GBT CTC TGB BTB TTGB CCT TCC BTG GCG GTC CTG CTT GGB-3'

des-adenosine antisense sequences:

HSJGEBFRAS1: GCC TGT GTC TGT CCT CCT (SEQ ID

30 NO:12)

HSJGEBFRAS2: GCT TCG TTC CTC TCG TTC
HSJGEBFRAS3: CTG CTT GGT GCC CTT GCC G
HSJGEBFRAS4: GTC CTG CTC CGG GCT GTG G
HSJGEBFRAS5: 5'-GTC CTC GCC CTG GCT CCG GCT

35 GGG CTC CCC TGG-3'

HSJGEBFRAS6: CCT TCG CTG GCT GGC GGC GTG C
HSJGEBFRAS7: CCC BGB BCG BGB CCC GGB CCG BCB
HSJGEBFRAS8: GGC CGT GGT TGG GGG TCT TC
HSJGEBFRAS9: GCT GCC TCC GTT TGG GTG GC

40 Human histidine decarboxylase:

5'-CTC TGT CCC TCT CTC TCT GTB CTC CTC BGG CTC CBT CBT CTC CCT TGG GC-3'

des-adenosine antisense sequences:

HUMHDCAS1: TCT CCC TTG GGC TCT GGC TCC TTC TC (SEQ ID NO:13)

45

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HUMHDCAS2: TCT CTC TCC CTC TCT CTC TGT

HUMHDCAS3: CGCCTCCGCCCTGGCTGCTGGGGTGGTGCTGC

HUMHDCAS4: TTT TGT TCT TCC TTG CTG CC HUMHDCAS5: GCC CCG CTG CTT GTC TTC CTC G

5 Human beta tryptase:

5'-GGG CCT GGC CTG GGG CBG GGG CCG CGT BGG CGC GGC TCG CCB GGB CGG GCB GCB GCB GCB GCB GBT TCB GCB TCC TGG-3'

des-adenosine antisense sequences:

HUMBTRYPAS1: CTTGCTCCTGGGGGCCTCCTG (SEQ ID

HUMBTRYPAS2: GTC CCT CCG GGT GTT CCC GGC

Human tryptase-I:

10

25

35

> des-adenosine antisense sequences: HUMTRYAS1: CTTGCTCCTGGGGGCCTCCTG (SEQ ID NO:15) HUMTRYAS2: GTC CCT CTG GCT G TT CCC GGC

20 Human prostaglandin D synthase:

5'-CCC CBG CBG GBC CBG TCC CBT CCB CBG CGT GTG BTG BGT BGC CBT TCT CCT GCB GCC GBG-3'

des-adenosine antisense sequences:
HUMPROSYNAS1:GGTGTGCGGGGCCTGGTGCC(SEQIDNO:16)
HUMPROSYNAS 2: CCT GGG CCT CGG GTG CTG CCT GT

HUMPROSYNAS 3: GCG CTG CCT TCT TCT CCT GG HUMPROSYNAS 4: 5'-GTC CTC GCC GGG GCC CTT GCT GCC CTG GCT GT -3'

HUMPROSYNAS 5: GCC CTG GGG GTC TGG GTT CGGCTGT

30 Human cyclooxygenase-2:

5'-TGB GCG CCB GGB CCG CGC BCB GCB GCB GGG CGC GGG CGB GCB TCG CBG CGG CGG GCB GGG-3'

des-adenosine antisense sequences: HUMCYCLOXAS1: GGGCGCGGGCGBGCBTCGC(SEQ ID NO:17) HUMCYCLOXAS2: TTT GGG CTT TTC TCC TTT GGT T

Human eosinophil cationic protein:

5'-CBG BCB BBT TTG GGB BGT GBB CBG TTT TGG BBC CBT GTT TCC CBG TCT CTG BGC TGT GGC-3'

des-adenosine antisense sequences:

HSECPAS1: CCTCCTTCC TGG TCT GTC TGC (SEQ ID

NO:18)

Human eosinophil derived neurotoxin:

5'-CCC CBB CBG BBG BBG CBG BCB BBT TTG GGB BGT GBB CBG TTT TGG BBC CBT GTT TCC TGT-3'

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des-adenosine antisense sequences: HSEOSDNAS1: GCC CTG CTG CTC TTT CTG CT (SEQ ID NO:19) HSEOSDNAS 2: TCC CTT GGT GGG TTG GGC C HSEOSDNAS 3: GCT GGT TGT TCT GGG GTT C 5 HSEOSDNAS 4: TTG CTG CCC CTT CTG TCC C HSEOSDNAS 5: TGT TTG CTG GTG TCT GCG C Human eosinophil major basic protein: GGG GGB GTT TCB TCT TGG CTT T des-adenosine antisense sequences: 10 TCT CCC CTT GTT CCT CCC C TCT CCT GCT CTG GTG TCT CCT C TTC CCT CCC TCC CCT GCC GTG TTG TCT GTG GGT GTC C GTT TCG CTC TTG TTG CCC 15 TGG GCC CTT CCC TGC TGG Human eosinophil peroxidase: 5'-GCB CCG TCC BGT GBT GGT GCG GTB CTT GTC GCT GCB GCG CTC GGC CTG GTC CCG GBG BGC-3' des-adenosine antisense sequences: 20 HSEPAS1: GCGCTCGGCCTGGTCCCGG (SEQ ID NO:20) HSEPAS2: GGG TCT CCT CTT GTT GC HSEPAS3: TTG CGC CTC CTG CTG GGG GT CC HSEPAS4: CTC TGT TCT TGT TTT GGG GGC HSEPAS5: GGG CCC GGC CGT TGT CTT G 25 HSEPAS6: GTT TGG GGG TTT CCG TTG HSEPAS7: GGG TTC TCC TGG CCC GGG CCT TGC CC HSEPAS8: GGC CGT GGT CCC GGC TTC GTT GC HSEPAS9: CCT GTC TCC GTC TCG GCT CTT CTG HSEPAS10: GGG CCT TGC GCT GTC TTT GGT G 30 Human intercellular adhesion molecule-1 (CAM-1): 5'- CGG BGC CTC CCC GGG GCB GGB TGB CTT TTG BGG GGG BCB CBG BTG TCT GGG CBT TGC CBG GTC CTG GGB BCB GBG CCC CGB GCB GGB CCB GGB GTG CGG GCB GCG 35 CGG GCC GGG GGC TGC TGG GBG CCB TBG CGB GGC TGB G-3' des-adenosine antisense sequences: HSICAMIASI: GCGCGGGCCGGGGGCTGCTGGG NO:21) 40 HSICAM1AS2: GGT TGG CCC GGG GTG CCC C HSICAMIAS3: GCC GCT GGG TGC CCT CGT CCTCTGCGGTC HSICAM1AS4: GTG TCT CCT GGC TCT GGT TCC CC HSICAMIASS: 5'-GCT GCG CCC GTT GTC CTC TGG GGT GGCCTTC-3' 45

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· HSICAM1AS6: GCT CCC GGG TCT GGT TCT TGT GT HSICAMIAS7: TGG GGG TCC CTT TTT GGG CCT GTT GT HSICAM1AS8: GGC GTG GCT TGT GTG TTC GGT TTC HSICAM1AS9: TGC CCT GTC CTC CGG CGT CCC 5 Human vascular cell adhesion molecule 1 (VCAM-1): 5'-CTG BGC BBG BTB TCT BGB TTC TGG GGT GGT CTC GBT TTT BBBB GCT TGB GBB GCT GCB BBC BTT BTC CBB BGT BTB TTT GBG GCT CCB BGG BTC BCG BCC BTC TTC CCB GGC BTT TTB BGT TGC TGT CGT -3' des-adenosine antisense sequences: 10 HSVCAM1AS1: CCTCTTTTCTGTTTTTCCC (SEQ ID NO:22) HSVCAM1AS2: CTC TGC CTT TGT TTG GGT TCG HSVCAM1AS3: CTT CCT TTC TGC TTC TTC C HSVCAM1AS4: CTGTGTCTCCTGTCTCCGCTTTTTTCTTC HSVCAM1AS5: GTC TTT GTT GTT TTC TCT TCC TTG 15 Human endothelial leukocyte adhesion molecule (ELAM-1): 5'-BBG TGB GBG CTG BGB GBB BCT GTG BBG CBB TCB TGB CTT CBB GBG TTC TTT TCB CCC -3' des-adenosine antisense sequences: 20 HUMELAMIAAS1: GTTCTTGGCTTCTTCTGTC(SEQ ID NO:23) HUMELAMIAAS2: CGT TGG CTT CTC GTT GTC CC HUMELAM1AAS3: TGT GGG CTT CTC GTT GTC CC HUMELAM1AAS4: CCC TTC GGG GGC TGG TGG HUMELAMIAAS5: GGC CGT CCT TGC CTG CTG G Human P Selectin: 25 des-adenosine antisense sequences: HUMPSELECTAS1: CTCTGCTGGT TTTCTGCCTT CTGCCC (SEQ ID NO:24) Human endothelial monocyte activating factor: 30 des-adenosine antisense sequences: HUMEMAPIIAS1: 5'-TTT TCT CTT TCG CTT TCT TTT CGTCTCCTGTTCCTCCTTTT-3' (SEO NO:25) HUMEMAPIIAS2: 5'-TTG CTG TTT TTT CTC CTT CTT 35 CTC TCC TTT CTT TTC -3' Human IL3: 5'-GGCGGBCCBGGBGTTGGBGCBGGBCGGGCB GGCGGCTCBTGTTTGGBTCGGCBGGBGGCBCTC -3' des-adenosine antisense sequences: HUMIL3AAS1: 5'-CTC TGT CTT GTT CTG GTC CTT CGT 40 GGG GCT CTG (SEQ ID NO:26)-3' HUMIL3AAS2: TGT CGC GTG G GTG CGG CCG TGG CC Human IL3 receptor:

5'-GCBGGBGBCBGGGCBGCGBTCBGGBGCBGCGT

GBGCCBBBGGBGGBCCBTCGGGBBCGCBGCTCCG
GBBCGCBGBCBGBCGTGCC-3'

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		des-adenosine antisense sequences: TCTGGGGTGTCCTG
	•	GCCTTCGTGGTTCC
5		TCTTCCTTCGTTTGC
		CGTCCGCGGGCCCCCGGGCCT
		GGCTGCGCTCCTGCCCCGC
		CTCTTTCCCGGGCTCTT
10		GCGCTGGGGGGTGCTCC
		CGTGTGTTTGCGCCCTCCTCCTGGTCGC
		GCTTGTCGTTTTGG
15		GGCCGGCTTTGCCCGCCTCCC
		GGCGCCTGGCCCGGCC
20		TTCCTGGGCTGCGC
20		GTTCTGTTCTTCCTGGC
	Human IL4	: 5'-GCCGGCBCBTGCTBGCBGGBBGBBCBGBGGGGGB BGCBGTTGGGBGGTGBGBCCCBTTBBTBGGTGTCGB-3'
25	·	des-adenosine antisense sequences: HUMIL4AS1: CTC TGG TTG GCT TCC TTC-3' (SEQ ID NO:27)
30	Human IL4	receptor: 5'-GTTCCCBGBGCTTGCCBCCTGCBGCBGGCCBGCCTC BCBGGGBBCBGGBGCCCBGBGCBBGCCBCCCCBTTGGGBG BTGCCBBGGCBCCCBGGCTG-3'
		des-adenosine antisense sequences: TCTGCGCGCCCCTGCTCC
35		CGCCCGGCTTCTCT
		CGTGTGGGCTTCGG
40		CCCCGCGCCTCCGTTGTTCTC
		TGCTCGCTGGGCTTG
45		GGTTTCCTGGGGCCCTGGGTTTC
45		TCTGCCGGGTCGTTTTC
		GGGTGCTGGCTGCG

	CTTGGTGCTGGGGCTCC
5	GGCGGCTGCGGGTTGGG
	CTTGGCTGGTTCCTGGCCTCGGG
	CCTCCTCCTCCTC
10	GCTCCCTTTTTCTTCCTCT
	TCCCTGCTGCTCTC
15	TGCCCTCCCTTCCCTGG
	GGTGCCTCCTTGGGCCCTGC
	GGCTGCTCCTTGCCCC
20	CTCTGGGTCGGGCTGGC
	GGGGCGTCTCTGTGC
25	CTGGCCTGGGTGCC
	GCCTCTCCTGGGGG
	GGTGGCTCCCTGTCC
30	CCTTTCCCCCGGCTCC
	GTGGGGCTTTGGC
	GGGGGTCTGTGGCCTCCTGGGG
35	AGGGGTCTGGGGCCCTC
	TTTTGGGGGTCTGGCTTG
40	GCCTGGCTTCC
	GGGGCCTGCCGTGGGGC
	TGTCCTCTGTTGCTCCCCTT
45	TGCCTGCTCTGG
	GGTTCCCGCCTTCCCT
	Human IL5: 5'-GTGGGBBTTTCTGTGGGGBTGGCBTBCBCGTBGGCB
50	GCTCCBBGBGCTBGCBBBCTCBBBTGCBGBBGCBTC CTCBTGGCTCTGBBBCG -3'

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			HUMILSAS1: TCC CTG TTT CCC CCC TTT (	SEQ	ID
			NO:28) HUMIL5AS2: CGT TCT GCG TTT GCC TTT GGC		
5			HUMIL5AS3: GTT TTT TGT TTG TTT TCT		
			HUMIL5AS4: CTC TCC GTC TTT CTT CTC C		_
			HUMIL5AS5: CCT CCT GCC TGT GTC CCT GCT C HUMIL5AS6: GAG GGT TTC TGG CTT CCT CTC T	CCC	С
			HUMILSASS: GAG GGT TTC TGG CTT CCT CTC T	Ľ	
10			HUMIL5AS8: 5'-TGT TGT GCG GCC TGG TGC T	CC	ССТ
			GCCCCG GG-3'	GC	CCI
	Human	IL5	receptor antisense oligonucleotide 5'-CTCBGTGGCCCCCBBBBGGBT GBGTBBTBCBTGCGCCBCGBT		
15			GBTCBTBTCCTTTTTBCTBTGBGG-3'	*	
			des-adenosine antisense sequences: CCGTGTCTGTCGTGTCT		
20			TTCCTTTGCTCTTG		
20	•		GTGTGTCTTTGCTGT		
			GCCCTGCCTCTCC		
25	Human	IL6	•		
			5'-CTCCTGGGGGTBCTGGGGCBGGGBB		
			GGCBGCBGCBBCBCCBGGBGCBGC		
			CCCBGGBBBGGCBBCTGGBCCGB		
			BGGCGCTTGTGGBGBBGGBGTTCBT		
30			BGCTGGGCTCCTGGBGGGGBGBTBGBGC-3'		
			des-adenosine antisense sequence:		
			HUMIL6AS1: GCT TCT CTT TCG TTC CCG GTG G	GC	TCG
			(SEQ ID NO:29)	****	
35			HUMIL6AS2: GTG GCT GTC TGT GTG GGG CGG CHUMIL6AS3: GTG CCT CTT TGC TGC TTT C	J.I.	
33			HUMIL6AS4: GAT TCT TTG CCT TTT TCT GC		
	Uuman	TT.6	receptor antisense oligonucleotides		
	numan	THO	5'-GCBCGCCTCTTGCCBCCTCCTGCGCBGGGCB		
			GCGCCTTGGGGCCBGCGCCGCTCCCGGCGCG		
40			GCCBGCBGCCBGCCBGCCGCB		
			CGGCCBGCBTGCTTCCTCCTCGGCTBCCBCT		
			CCBTGGTCCCGCBGBGGCGGBCBGGC-3'		
			des-adenosine antisense sequences: GGGGGTGGCTTCCTGCC		
45			GCGTCTCTGGGCCGTCCC		
			GTCCCTCGGCCCGCGCGCGCTCGGCTCCTCTCCC		
			TCTGGCCCGGCTC		

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	GGGGCGGGGGGGGGGGGGGG
	GGCGCTGCCCTGCGC
5	GCGGCGCTGGCCCC
	TGCTGGCCGTCGGCTGCGCTGCCCT
	GCTGGCCGCGGG
10	GCCTGTCCGCCTCTGCGGG
	CGCTGTCTCCTGGC
	TTGTCTTCCGGCTCT
15	TCTGCTGGGGTGGG
	GCTGGGCGGCCGGT
	GCTGGGGCTCCTCGGGGGG
20	GGGGGCTCTTCCGG
	GCTGTCTCCCTCCGGG
25	GCGGGGTTTCTGGCC
	GTGGGGTCTTGCC
	TGGCCTCCGGGCTCC
30	TGCTTGTCTTGCCTTC
	TCTGGTCGGTTGTGGCTCG
35	GGGCTCCGTGGGTCCCTGGC
	GCCCGTTTGTGTTTTGTC
	TTTTCCCCTGGCGT
40	CCCTGTGCCCCTCTCCTCCTTCCTCTCTCTC
	GCTCTCCTTTGTGGG
45	GCCCTCCCTGCTGCT
	CTTGGTTTTGGGCT
	TTTTTCTCTTCCTCCTTTTTC
50	GTGCGTGGGCCTCC

<del>-</del>33-

5	Human	monocyte-derived neutrophil chemotactic factor: 5'-GGGGTGGBBBGGTTTGGBGTBTGTCTTTBTGCBCTGB CBTCTBBGTTCTTTBGCBCTCCTTGGCBBBBCTGCBC CTTCBCBCBGBGCTGCBGBBBTCBGGBBGGCTGCCBB GBGBGCCBCGGCCBGCTTGGBBGTCBTGTTTBCBCBC BGTGBGBTGGTTCCTTCCGG-3'
10		des-adenosine antisense sequences: HSMDNCFAS1: GCT TGT GTG CTC TGC TGT CTC T (SEQ ID NO:30) HSMDNCFAS2: 5'-TGG TTC CTT CCG GTG GTT TCT TCC TGG CTC TTG TCC T -3' HSMDNCFAS3: TTC TCT TGG CCC TTG GC
15	Human	neutrophil elastase (medullasin): 5'-GGGCTCCCGCCGCGBGBGGTTBTGGGCTCCCBGGBCCBC CCGCBCCGCGCGGBCGTTBCBTTCGCCBCGCBGTGCGC GGCCGBCBTGBCGBBGTTGGGCGCBBTCBGGGTGGCGCC GCBGBBGTGGCCTCCGCGCGCTGCBGGBCBCCBTGBB GGGCCBCGCGTGGGGCCCCCCCBCBBT CTCCGBGGCCBGCGCGCCCCCCBCBGC CBGGBCBCBCGCGGGGGGGCCCCCCBGGG
20		GGTCBTGGTGGGGCTGGGGCTCTCTGCCCCTC CGTGC-3'  des-adenosine antisense oligonucleotides: HSMEDURAS1: 5'-TGG TGG GGC TGG GGC TCC GGG GTC
25		TCT GCC CCT CCG TGC-3' (SEQ ID NO:31) HSMEDURAS2: CGC GTG GGG CCG CGC TCG CCG GCCCCCC HSMEDURAS3: CCT GCC GGG TGG GCT CCC GCC GCG HSMEDURAS4: CGC CGG CCT GCC GGC CCC TC HSMEDURAS5: 5'-GTG GGT CCT GCT GGC CGG GTC CGG
30	••	GTC CCG GGG GTG GGG-3' HSMEDURAS6: CGC GBG TCG GCC GBG GGT C
35	Human	neutrophil oxidase factor: 5'-CGGGBGTGGGGGTCCTGGBCGCBCTGBBGGCBTCCBGGG CTCCCTTCCBGTCCTTCTTGTCCGCTGCCBGCBCCCCTTC BTTCCBGBGGCTGBTGGCCTCCBCCBGGGBCBTGBTTBGG TBGBBBCTBGGBGGCC-3'
40		des-adenosine antisense sequence: HUMNOXFAS1: GGC CTC CBC CBG GGB CBT G (SEQ ID NO:32) HUMNOXFAS2: GTC CTT CTT GTC CGC TGC C HUMNOXFAS3: TCT CTG GGG TTT TCG GTC TGG GTG G HUMNOXFAS4: GCT TTC CTC CTG GGG CTG CTG
<b>4</b> 5		HUMNOXFAS5: 5'-GGC TCT TCT TTT TGT TTC TGG CCT GGTG-3' HUMNOXFAS6: CTC TCT CGT GCC CTT TCC HUMNOXFAS7: CTT GGG TGT CTT GTT TTT GT HUMNOXFAS8: 5'-GGCCTCCBCCBGGGBCBTGGTCCTTCTT GTCCGCTGCC -3'

	Human	cathepsin G:
		5'-CCCTCCBCBTCTGCTCTGBCCTGCTGGBCTCTG
		GBTCTGBBGBTBCGCCBTGTBGGGGCCCGGBCTG
_		GGGCCTGCTCCCGGCCTCCGBTGBTCTCCCCT
5		GCCTCBGCCCCBGTGGGTBGGBGBBBGGCCBGCB
		GBBGCBGGBGTGGCTGCBTCTTTCCTG -3'
		des-adenosine antisense sequences:
		HUMCTHGAS1: GTG GGG CCT GCT CTC CCG GCC TCC G
		(550 ID MO:33)
10		HUMCTHGAS2: TGTGTTGCTGCGTCTTTTCCCCCTCTCTCTCTCTCTCTC
		HUMCTHGAS3: TCT GCC TTC GGG GGT CGT
	Human	defensin 1:
		5'-CCGGGGCTGCBGCBBCCTCBTCBGCTCTTGCCT
		GGBGTGGCTCBGCCTGGGCCTGCBGGCCBCCB
15		GGBGBBTGGCBBGGBTGGCGBGGGTCCTCB
		TGGCTGGGGTCBCBGBTCCTCTBGCTBCGCBCC
		GTGBCCBGBGBGGC-3'
		des-adenosine antisense sequences:
		HUMDEFIAAASI: GGG TCC TCB TGG CTG GGG (SEO TD
20		NO:34)
		HUMDEF1AAAS2: GCC TGG GCC TGC BGG GCC
		HUMDEFIAAAS3: GCT CTT GCC TGG BGT GGC TC
		HUMDEF1AAAS4: GCC CBG BGT CTT CCC TGG T
	Human d	lefensin 3:
25	-	5'-CGCTGCBBTCTGCTCCGGGGCTGCBGCBBCCTCBTC
		BGCTCTTGCCTGGBGTGGCTCBGCCTGGGCCTGCBG
		GGCCBCCBGGBGBBTGGCBGCBBGGBTGGCGRGCGT
		CCTCBTGGCTGGGGTCBCCTGGBGGGGGGGGGGGGGGG-3'
		des-adenosine antisense sequences:
30		HUMNTRILIAS1: GGG TCC TCB TGG CTG GGG TC (SEQ
		ID NO:35)
		HUMNTRIIIAS2: CCT CTC TCC CGT CCT
	Human r	nacrophage inflammatory protein-1-alpha: RANTES
	RECEPTO	R Procedure Procedure RANTES
35		5'-GBGGGGGCBGCBGTTGGGCCCCBBBGGCCCTCTCGT
		TCBCCTTCTGGCBCGGBGTTGCRTCCCCRTBCTCCBB
		BCTCTGTGGTCGTCBTBGTCCTCTGTGCTCTTTC
		GBGTTTCCBTCCCGGCTTCTCTCTGGTTCCBBGGGB-3'
		des-adenosine antisense sequences:
40		HUMKANTESASI: GTC TTT GTT TCT GGG CTC GTG CC
		(SEQ ID NO:36)
		HUMRANTESAS2: CCB TCC CGG CTT CTC TCT GGT TCC
		TOMERANTESASS: GTC CTCTGT GGT GTT TGG
45		HUMRANTESAS4: 5'-CCC TGC TTC CTT TTG CCT GTT
23		TCTTTGTTT CTGGGCTCGT GCC -3'

5	KANTES:	5'-GGGCBCGGGCBGTGGGCGGCBBTGTBGGC BBBGCBGCBGGTGTGGTGT
10		GGGTGTGGTCCG
		CTTGGCGGTTCTTTCGGGTG
		TTTCTTCTGGGTTGGC
15		CTGCTGCTCGTCGTC
•		GCTCCGCTCCCGGGTTC
	.•	GTCTCGCTCTGTCGCCC
20		CTTCCTTGTC
,		GTGTTCCTCCCTTGCCTCT
	Human mus	carinic acetylcholine receptor HM1:
25		des-adenosine antisense sequences: HSHM1AS1: GTT CBT GGT GGC TBG GTG GGG C (SEQ ID NO:37) HSHM1AS2: GCT GCC CGG CGG GGT GTG CGC TTG GC
30		HSHM1AS3: GCTCCCGTG CTC GGT TCT CTG TCTCCCGGT HSHM1AS4: CCC CCT TTG CCT GGC GTC TCG G HSHM1AS5: GCC TTC GTC CTC TTC CTC TTC CTTCC HSHM1AS6: 5'-GCT CCG TGG GGG CTG CTTGGTGGG
		GGCCTG TGC CTC GGG GTC C-3' HSHM1AS7: CGG GGC TTC TGG CCC TTG CC
35	Human mus	carinic acetylcholine receptor HM3:
•		des-adenosine antisense sequences: HSHM3AS1: GGG GTG GGT BGG CCG TGT CTG GGG (SEQ ID NO:38)
40		HSHM3AS2: GTT GGC CBT GTT GGT TGC C HSHM3AS3: TCT TGG TGG TGC GCC GGG C HSHM3AS4: 5'-GCG TCT TGG CTT TCT TCT CCT TCG GGC CCT CGG GCC GGT GCT TGT GG-3'
		HSHM3AS5: 5'-GCT CCT CCC GGG CGG CCT CCC CGG GCG GGG GCT TCT TG-3'
45		HSHM3AS6: GCG CTG GCG GGG GGG CCT CCT CC HSHM3AS7: 5'-GCT CTG TGG CTG GGC GTT CCT TGG TGT TCT GGG TGG C-3'
		HSHM3AS8: TGG CGG GCG TGG TGG CCT CTG TGG TGG HSHM3AS9: GGG CCC GCG GCT GCB GGG G
50		HSHM3AS10: TTG CCT GTC TGC TTC GTC HSHM3AS11: CTT TGC GCT CCC GGG CCG CC

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# Human fibronectin:

	des-adenosine antisense sequences:	
	HUMFNA/HSFIB1AS1: CGG TTT CCT TTG CGG TC ( ID NO:39)	SEQ
5	HUMFNA/HSFIB1AS2: TTG GCC CGG GCT CCG GGT G	:
	HUMFNA/HSFIB1AS3: CCC GCC CGC CCG GCC GCC	, CGC
	HUMFNA/HSFIB1AS4: 5'-CCC GCC GGG CTG TCC	ccc
	כככ כככ כככ או	CCG
	HUMFNA/HSFIB1AS5: GGC CCG GGG CGC GGG GG	
10	HUMFNA/HSFIB1AS6: CGG CCC TCC CGC CCC TCT G	iG.
	HUMFNA/HSFIB1AS7: GCC GGC GCG GGC GTC GG	_
	UIMENA /USETDIASO. E/_CCC COC CCC CCC CCC	ርጥጥ
	CCC TCT CCC CCCTGTGC- HUMFNA/HSFIBIAS10: GCC TGC CTC TTG CTC TTC HUMFNA/HSFIBIAS11: TGC GTC CGC TGC CTT CTC HUMFNA/HSFIBIAS12: CTC TCC TCG GCC GTT GCCTG' HUMFNA/HSFIBIAS13: 5'-TGT CCG TCC TGT CGC TCC GTG GTG C-3'	
	HUMFNA/HSFIB1AS10: GCC TGC CTC TTG CTC TTC	-
15	HUMFNA/HSFIB1AS11: TGC GTC CGC TGC CTT CTC	CC
	HUMFNA/HSFIB1AS12: CTC TCC TCG GCC GTT GCCTG	ፓርር
	HUMFNA/HSFIB1AS13: 5'-TGT CCG TCC TGT CGC	CCT
	TCC GTG GTG C-3'	
	HUMFNA/HSFIB1AS14: TGT TGT CTC TTC TGC CCT HUMFNA/HSFIB1AS15: GGT GTG CTG GTG CTGGTGGTGG HUMFNA/HSFIB1AS16: CCT CTG CCC GTG CTC GCC HUMFNA/HSFIB1AS17: CTG CCT GGG CTG GCCTCTTCGG HUMFNA/HSFIB1AS18: 5'-GTG GCT TTG GGG CTC	С
20	HUMFNA/HSFIB1AS15: GGT GTG CTG GTG CTGGTGGTG	GTG
	HUMFNA/HSFIB1AS16: CCT CTG CCC GTG CTC GCC	<b>J</b> 10
	HUMFNA/HSFIB1AS17: CTG CCT GGG CTG GCCTCTTCGG	ር ተ
	HUMFNA/HSFIB1AS18: 5'-GTG GCT TTG GGG CTC '	TCT
	1444 1114 CCC 111111 1 1	
25	HUMFNA/HSFIB1AS19: 5'-CTT CTC GTG GTG CCT	רידיר
	CTC CCT GGC TTG GTC GT-	
	HUMFNA/HSFIB1AS20: TGT CTG GGG TGC TGCTCCTCTC	
	HUMFNA/HSFIB1AS21: TTT CCC TGC TGG CCG TTT (	
	HUMFNA/HSFIB1AS22: CCT GTT TTC TGT CTT CCT	OT:
30	HUMFNA/HSFIB1AS23: TTC CTC CTG TTT CTC CGT	
-	HUMFNA/HSFIB1AS24: 5'-TTG GCT TGC TGC TTG	caa
	GGC TGT CTC C-3'  HUMFNA/HSFIB1AS25: CTT GCC CCT GTG GGC TTT CC  HUMFNA/HSFIB1AS26: TGG TCC GGT CTTCTCCTTGGGGC  HUMFNA/HSFIB1AS27: GCC CTT CTT GGT GGG CTG  HUMFNA/HSFIB1AS28: GCT CGT CTG TCT TTT TCC TTCC  HUMFNA/HSFIB1AS28: E'-TCC GCC TCC CCC TTCC TTCC TCC TTCC TCC T	CC
	HUMFNA/HSFIB1AS26: TGG TCC GGT CTTCTCCTTGGGGG	בער הער
35	HUMFNA/HSFIB1AS27: GCC CTT CTT GGT GGG CTG	
-	HUMFNA/HSFIB1AS28: GCT CGT CTG TCT TTT TCC T	rcc
	HUMFNA/HSFIB1AS29: 5'-TGG GGG TGG CCG TTG	
	GCG GTG TGG TCC GCC T-3	
	HUMFNA/HSFIB1AS30: TGC CTC TGC TGG TCT TTC	
	,, 100 010 100 101 110	
40	Human interleukin 8:	
	5'-GBTGTTTGTTBCCBBBGCBTCBBGBBTBGCTTTGC	
	TBTCTBBGGBTCBCBTTTBGBCBTBGGBBBBCGC	
	TGTBGGTCBGBBBGBTGTGCTTBCCTTCBCBCBG	
	BGCTGCBGBBBTCBGGBBGGCTGCCBBGBGBGCC	
45	BCGGCCBGCTTGGBGTCBTGTTTBCBCBCBGTGBG-3'	
	des-adenosine antisense sequences:	
	HUMIL8AAS1: GTG CTC CGG TGG CTT TTT (SEQ	ID
	NO:40)	
	HUMIL8AAS2: GCT TGT GTG CTC TGC TGT CTC TG	
50	HUMIL8AAS3: 5'-TTC CTT CCG GTG GTT TCT TCC	rgg
	CTC TTG TCC T-3'	
	HUMIL8AAS4: TTC TCT TGG CCC TTG GCC C	

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5		5'-BCBGGGCTGTBBTCTTCBTCTGCBGGTGGCB TGCCBGTGBBBTTTBGBTCBTCBBBBTCCCBCBT CTGTGGBTCTGTBBTBTTTTGBCBTGTCCTCTTC BGTTTCBGCBBTGGTTTGBTCTBBCTGBBGCBCCG
		GCCBGG-3'  des-adenosine antisense sequences: TGGCTCGGTGCTTCTGCCCC
		TGTTGTTGCGGCGCTC
10		GGTTGGTGGCCCCTG
		TGGTGCTTCGTTTCC
15		CCCTCTTTCTCTTTGTTC
		GGGGGTTCTTGTGGC
		GGGCTGCTTGTCTCGTTCC
20	Human	GM-CSF: 5'-CTTGBGCBGGBBGCTCTGGGGCBGGGBGCTGGCBG GGCCCBGGGGGGGGGTGCCTTCCTGCBCTGTCCBGBGT GCBCTGTGCCBGCBGCBGCBGCBCCBTCBG
25		CTTCBTGGGGCTCTGGGTGCBGGCTCCBGCCBTGG GTCTGGGTGGGCTGGGC
		<pre>des-adenosine antisense sequences: HUMGCSFAS1:GGT CCB GCC BTG GGT CTG GG (SEQ II NO:41)</pre>
30		HUMGCSFAS2:GGC TGG GCT GCB GGC TCC GG HUMGCSFAS3: GCG GGC GGG TGC GGG CTG CGT GCC HUMGCSFAS4: GGC TGC CCC GCA GGC CCT GC
	Human	tumor necrosis factor α: 5'-CBCCGCCTGGBGCCCTGTGTCTTCTTGGG
35		GBGCGCCTCCTCGGCCBGCTCCBCGTCCCGGBTCBTGCTTT CBGTGCTCBTGGTGTCCTTTCCBGGGGBGBGBGGG-3'
		des-adenosine antisense sequences HSTNFAAS1: GCT GGT CCT CTG CTG TCC TTG CTG (SEC ID NO:42)
40		HSTNFAAS2: GTG CTC BTG GTG TCC TTT CC HSTNFAAS3: GCC CTG GGG CCC CCC TGT CTT CTT GGGG HSTNFAAS4: CCT CTT CCC TCT GGG GGC CG HSTNFAAS5: TCT CTC TCC CTC TCT TGC GTC TCT C HSTNFAAS6: TCT TTC TCT CTC TCT CTT CCC C
45		HSTNFAAS7: TTT CCC GCT CTT TCT GTC TC HSTNFAAS8: GGT GTC TGG TTT TCT CTC TCC HSTNFAAS9: GCT GGC TGC CTG TCT GGC CTG CGC TCTT HSTNFAAS10: GGC CTG TGC TGT TCC TCC
50		HSTNFAAS11: TCC GGT TCC TGT CCT CTC TGT CTG TC HSTNFAAS12: GCC CCC TCT GGG GTC TCC CTC TGG C HSTNFAAS13: GTG GTG GTC TTG TTG CTT

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HSTNFAAS14: GGG CTG GGC TCC GTG TCT C HSTNFAAS15: CBG TGC TCB TGG TGT CC HSTNFAAS16: GCT GBG GGB GCG TCT GCT GGC

Human leukotriene C4 synthase:

5 5'-CTCGGTBGBCGCGCTCGBBCTCGGGTGGCCCGGTGGTG BGCGGCGGCGBCBCGCGGGBBGGCCCTGCGCGCCGBGBTCBC CTGCBGGBGBBGTBGGCTTGCBGCBGGBCTCCCBGGBGGG TGBCBGCBGCCBGTBGBGCTBCCTCGTCCTTCBTGGTBCCG TCGGTGTGGCBCGGGCTGTGTGTGBBGGCGBGCTGG-3'

10 des-adenosine antisense sequences: HSU11552AS1:GCC CCG TCT GCT GCT CCT CGT GCC G

(SEQ ID NO:43)

HSU11552AS2: 5'-CCT CGT CCT TCA TGG TAC CGT CGGTGT GGT GGC-3'

HSU11552AS3: CTC GGG TGG GCC GGT GGT G HSU11552AS4: GGG CGC GCG CGC TCG CGT

HSU11552AS5: 5'-GGC TCC GGC TCT TCT TTC CCG GCTCCG TCG GCC CGG GGG CCTTGGTCTC-3'

HSU11551AS6:CCT CGT CCT TCB TGG TBC CG

20 Human Endothelin-1:

15

40

5'-BCCGGCGGBGCCGCCBGGGTGGBCTGGGBGTGGGTT TCTCCCCGCCGTTCTCBCCCBCCGCGCTGBGCTCBGCGC CTBBGBCTGCTGTTTCTGGBGCTCCTTGGCBBGCCBCBB BCBGCBGBGBBBBTCBTGBGCBBBTBBTCCBTTCTGB

25 BBBBBBGGGBTCBBBBBCCTCCCGT-3'

> des-adenosine antisense sequences: CCCGTTCGCCTGGCGC

GCGCTGCGGGTTCCTC

GTGGGTTTCTCCCCGCCGTTCTC

30 CGGTCTGTTGCCTTTGTGGG

CTTCTTGTCTTTTTGGCT

GTTCTTTTCCTGCTTGGC

GTCTTTTCCTTTCTT

TGTGCTCGGTTGTGGGTC

35 CGCTGGTCCTTTGCC

CTGTGTGTTTCTGCTG

Endothelin receptor ET-B antisense oligonucleotides

5'-GCCCTGTCGGGCGGBBGCCTCTCTCCCCCBG BTCCGCGBCBGGCCGCBGGCBBGBBCCBGCGCBBCCBGG GCGCGTCCGCBCBGBCTTGGBGGCGGCTGCBTGCTGCTB CCTGCTCCBGBBGCGTCCGGTGGCCGCCGC-3'

-39-

des-adenosine antisense sequences: GCGTCCGGTGGCCGCCGC GCCTCTCTCCTCCCC GTGGCCCTGTCGGGCGGG 5 TCCTGCCGTCCTGTCTCCTTT TCTTTTGCTGTCTTGT CTTCCCGTCTCTGCTTT Endothelin ETA receptor antisense oligonucleotides 5'-CBTCCBCBTGBTTGCTTBGBTTTGTGCTGTBTCTCTCB GGBTTBTCBCTGBTTBCBCBTCCBBCCBGTGCCBGCCBBBB 10 GGBTGCCCTGBGGCBBBGGGTTTCCBTCTTGBGGCBBBTTT GBGGB-3' des-adenosine antisense sequences: GTCTGTCCTCCCGTCTCCTCCC 15 ACTGCTTCTCCCGGGG GCTTCCCCGGCTTC GGGTGGCCGGTGTCCCGGGCTCCGGCGCGCGC 20 GGCTTCGGCTGC GGGTGGGTGGCGCGG GCTGCCGGGTCCGCGCGCGCCTGGGCC 25 CTTGTGCTGCTTTT TGCTTGTTCCGTTC TGGCTGCTCCGGTCTGTGTTGTGTTTTTG TTTCTTCTTGGGTGTGGG 30 **CCTTGCGGTTTTGG CTGTGGGCCCTTTG** GGGCCTTGGCTTCTGGCTC 35 Substance P antisense oligonucleotide 5'-CTGCTGBGGCTTGGGTCTCCGGGCGBTTCTCTGCBGBBGBT GCTCBBBGGGCTCCGGCBGTTCCTCCTTGBTCTGGTCGCTGTCG TBCCBGTCGGBCCBGTBBTTCBGBTCBTCBTTGGCTCCTBTTTC TTCTGCBBBCBGCTGBGTGGBGBCBBGBBBBBBBBBCTGCCBBGG 40 CCBCGBGGBTTTTCBTGTTGGBTTTTGCGBCGGBCBGTCCCGCG GGGTGCTGAGTTTCTCTGGTTCCTCCGBGCGCB-3'

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		des-adenosine antisense sequences: CGTGGTCGCTCCGC
		TTTCTCTGGTTCCTCCG
		GTCCCGCGGGGTGCTG
5		TCTGGTCGCTGTCGT
		GGCTTGGGTCTCCGGGCG
		GTTTCCTTTCCGC
10	Substance	P receptor antisense oligonucleotide 5'-GGCTBBGBTGBTCCBCBTCBCTBCCBCGTTGCCCBCBCB GBGGTCBCCBCBBTGBCCGTGTBGGCBGCTGCCCBBBGGBCBB TTTGCCBGGCTGGTTGCBCGBBCTGBTTGGGTTCCGBGGTGTT BGTGGBGBTGTTTGGGGBGBGGTCTGBGTCCBCCGGGBGGBCG TTBTCCBTTTCGBBGCTBGGCGGTBBBGCCCTBCTBTCTGTBC
15		BCBBCCCCCTCTGCBGCBGBGTCCTGTCGTGGCGCCTGGGGC TCBGGGTCC-3'
		des-adenosine antisense sequences: GTCCTGTCGTGGCGCCTGGGGCTC
20		TTCTTTTGTGGGCT
		CTTTGGTGGCTG
		TGGTCTCTGTGGTTG
25		CTGCCCTGGGTCTGG
		GGGTGTGGCCTTGGGGCCCCCCCTCGTGGGCCCCC
30	Chymase	5'-GGBGCTGBTBCTGCBGATTTCBGBGGGBBGBBCCCT GBTBCTCBCCBGCTTCBGCTCTGGBGCBCBBGBBGBBGB GCBGCBGGGGBGBGGBBGBBGCBTCTTCCCBGBGB GGCTGCCTGBGCBBBTGCTGGTTTTCCTTTCC
35		des-adenosine antisense sequences: CGTTTTCTCTCTC
		TGCTGGTTTTCCTTTCC
4.0		TGGCAGTGGGGGTGGGGTGGGC
40		TTCCTTGTTCCTGGGGGTGTCCT
		CTTGCTCTGGGCTTTTCT
45		CCCCTTTCCTTCC
		TGTCTGTTTTCCTGGGG

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	CTCTCCTCTGTCTCTGTGT
	CCTTGCCCTGGCCC
5	TCTTCCCTCTCTCTCTGT
	CCCTGTGTTCCGCCC
- 0	GTCTTCCCTCTCTG
10	ACCTCCTTTCCTCCG
×.	CTGGGTGGGCCCTG
	CCTGTTCTCTGCTCCC
	TGGCTTGGGGTTTCTTCTG
15	TGTGTCTTCCTCTGTT
	GGCTGGCTTTCTCCTTC
	TTTTGTCTTCCTGGG
	TGCCCCTTCTTCCTTTGGG
20	TCCTTGGTGCTTGGGCTGGG
25	Endothelial nitric oxide synthase 5'-GCGTCTTGGGGTGCBGGGCCCBTCCTGCTGCGCCTGGGCG CTGBGGGTGTCBTBGGTGBTGCTCCCCBCCTCCCBGTTCTTCB CBCGBGGGBBCTTGGGCCCCTCTGGGGGCTGGGTTBGCGGGB GCTCGGGGGGCTGTTCTTGGCGCTGGTGGGBTGCT GGGGCCCGGCTGGGCTCBGGGCCGGGTGGCTGGCCCTGCT TGCCGCBCBGCCCBBGCCCCBGCCCCBGCCCCBGGCGTGGCCCCBGGC CCGGCTCGGGCTCTTGGGGCCBCGCTCTTCBBGTTGCCCBTGTTB CTGTGCGTCCGTCTGCTGGBGCBGGCBGGCBGGBBTTC-3
25	5'-GCGTCTTGGGGTGCBGGGCCCBTCCTGCTGCGCCTGGGCG CTGBGGGTGTCBTBGGTGBTGCTCCCCBCCTCCCBGTTCTTCB CBCGBGGGBBCTTGGGCCCCTCTGGGGGCTGGGTTBGCGGGB GCTCGGGGGGCTGTGTTCTGGCGCTGGTGGGBGTBGGGBTGCT GGGGCCCGGCTCGGCT
	5'-GCGTCTTGGGGTGCBGGGCCCBTCCTGCTGCGCCTGGGCG CTGBGGGTGTCBTBGGTGBTGCTCCCCBCCTCCCBGTTCTTCB CBCGBGGGBBCTTGGGCCCCTCTGGGGGCTGGGTTBGCGGGB GCTCGGGGGGCTGTTCTTGGCGCTGGTGGGBGTBGGGBTGCT GGGGCCCGGCTCBGGGCCCGGGGTGGCTGGGCCCTGCT TGCCGCBCBCCCCBBGCCCCBGCCCCBGCCCCBGGCGCBGGG TGGCCCBGGCTCCTGGGCCBCCCCTTCBBGTTGCCCBTGTTB CTGTGCGTCCGTCTGCTGGBGCBGGCBGGBGTGGGBBTTC-3
	5'-GCGTCTTGGGGTGCBGGGCCCBTCCTGCGCCCTGGGCG CTGBGGGTGTCBTBGGTGBTGCTCCCCBCCTCCCBGTTCTTCB CBCGBGGGBBCTTGGGCCCCTCTGGGGGCTGGGTTBGCGGGB GCTCGGGGGGCTGTTCTTGGCGCTGGTGGGBGTBGGGBTGCT GGGGCCCGGCTGGGCTCBGGGCCGGGGTGGCTGGGCCTGCT TGCCGCBCBCCCCBGGCCCBGCCCCBGCCCCBGGCCGCBGGG TGGCCCBGGCTCCTGGGCCBCCCCTTCBBGTTGCCCBTGTTB CTGTGCGTCCGTCTGCTGGBGCBGGCBGGCBGGBBTTC-3  des-adenosine antisense sequences: CTGTGCGTCCGTCTGCTGG
	5'-GCGTCTTGGGGTGCBGGGCCCBTCCTGCGCGCTGGGCG CTGBGGGTGTCBTBGGTGBTGCTCCCCBCCTCCCBGTTCTTCB CBCGBGGGBBCTTGGGCCCCTCTGGGGGCTGGGTTBGCGGGB GCTCGGGGGGCTGTTCTTGGCGCTGGTGGGBGTGGCT GGGGCCCGGCTGGGCTCBGGGCCCGGGTGGCCCTGCT TGCCGCBCBGCCCBBGCCCCBGCCCCBGGCCCCBGGC TGGCCCBGGCTCTTGGGGCCBCCCCBGCCCCBGGCCCBTGTTB CTGTGCGTCCGTCTGCTGGBGCBGGCBGCBGGTGGGBBTTC-3  des-adenosine antisense sequences: CTGTGCGTCCGTCTGCTGG GGGGCCGGGGTGGCTGCCCCCCGC
30	5'-GCGTCTTGGGGTGCBGGGCCCBTCCTGCGCCCTGGGCG CTGBGGGTGTCBTBGGTGBTGCTCCCCBCCTCCCBGTTCTTCB CBCGBGGGBBCTTGGGCCCCTCTGGGGGCTGGGTTBGCGGGB GCTCGGGGGGCTGTTCTTGGCGCTGGTGGGBGTBGGGBTGCT GGGGCCCGGCTGGGCTCBGGGCCCGGGGTGGCCTGCT TGCCGCBCBGCCCBBGCCCCBGCCCCBGCCCCBGGCGCGCGGGG TGGCCCBGGCTCTGGGGCCBCGCTCTTCBBGTTGCCCBTGTTB CTGTGCGTCCGTCTGCTGGBGCBGGCBGGCBGGBBTTC-3  des-adenosine antisense sequences: CTGTGCGTCCGTCTGCTGG GGGGCCGGGGTGGCTGGCCCGC ACGACCCCGGGCCGACCCGAG
30	5'-GCGTCTTGGGGTGCBGGGCCCBTCCTGCTGCGCCTGGGCG CTGBGGGTGTCBTBGGTGBTGCTCCCCBCCTCCCBGTTCTTCB CBCGBGGGBBCTTGGGCCCCTCTGGGGGCTTGGTTBGCGGGB GCTCGGGGGGCTGTTCTTGGCGCTGGTGGGBTGGCT GGGGCCCGGCTGGGCTCBGGGCCCGGGTGGCCCTGCT TGCCGCBCBGCCCBBGCCCCBGCCCCBGCCCCBGGCCGCBGG TGGCCCBGGCTCCTGGGGCCBCCCCBGCCCCBGGCCGBTGTTB CTGTGCGTCCGTCTGCTGGBGCBGCBGCBGBGTGGGBBTTC-3  des-adenosine antisense sequences: CTGTGCGTCCGTCTGCTGG GGGCCCGGGCCCGCCCGC ACGACCCGGGCCGACCCGAG GCTCGGGGCCGACCCGAG
30	5'-GCGTCTTGGGGTGCBGGGCCCBTCCTGCGCCTGGGCG CTGBGGGTGTCBTBGGTGBTGCTCCCCBCCTCCCBGTTCTTCB CBCGBGGGBBCTTGGGCCCCTCTGGGGGCTGGGTTBGCGGGB GCTCGGGGGGCTGTGTTCTGGCGCTGGTGGGBGTBGCGBTGCT GGGGCCCGGCTGGGCTCBGGGCCCGGGTGGCTGGGCCCTGCT TGCCGCBCBGCCCBGGCCCBGCCCCBGCCCCBGGCCGCBGGG TGGCCCBGGCTCTGGGGCBCGCTCTTCBBGTTGCCCBTGTTB CTGTGCGTCCGTCTGCTGGBGCBGCBGCBGBGTGGGBBTTC-3  des-adenosine antisense sequences: CTGTGCGTCCGTCTGCTGG GGGGCCGGGCCCTGCTTGCCGC  ACGACCCCGGGCCGACCCGAG  GCTCGGGGCCGACCCGAG  CTTGGGCCCCTCTGTGTTCTGCGGGCCTGCTTGCCGC  CTTGGGCCCCCTCTGGGGGCCTGGTGGGG CTTGGGGCCCCTCTTGGCGG
30	5'-GCGTCTTGGGGTGCBGGGCCCBTCCTGCTGCGCCTGGGCG CTGBGGGTGTCBTBGGTGBTGCTCCCCBCCTCCCBGTTCTTCB CBCGBGGGBBCTTGGGCCCCTCTGGGGGCTGGGTTBGCGGGB GCTCGGGGGGCTGTGTTCTGGCGCTGGTGGGBGTBGCGTT GGGGCCCGGCTGGGCTCBGGGCCCGGGGTGGCCCTGCT TGCCGCBCBGCCCBGGCCCBGCCCCBGCCCCBGCCCGBGGG TGGCCCBGGCTCCTGGGCCBCGCTCTTCBBGTTGCCCBTGTTB CTGTGCGTCCGTCTGCTGGBGCBGGCBGGBGBGTGGGBBTTC-3  des-adenosine antisense sequences: CTGTGCGTCCGTCTGCTGG GGGCCCGGGCCGGGCCCTGCTTGCCGC  ACGACCCCGGGCCGACCCGAG  GCTCGGGGGCCGACCCGAG  CTTGGGCCCCTCTGGGGGCCTGGTTGCCGC  TCCTGCGCCCCTCTGGGGGCCTGGTTGCCGC  TCCTGCGCCCCTCTGGGGGCCTGGTTGCCGC

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	GGTGCCTGTGGCTGCC
	GGTTGCCCCGGTTGGTGGC
	GCCGTCCTGCTGCCGGT
	CGTTGGCTGGGTCCCCCGC
5	CCGTTTCCTGGGGTCC
	GCGTGGGGTGCTCC
	GGTTCCTCGTGCCG
	CTGCTGCCTTGTCTTTCC
	GGCCGTGGCGGCGTGGTCC
10	GCCCCCCTGGCCTTCTGCTC
	GGGGTCTGGCTGGT
	TGCCGGTGCCCTTGGCGGC
	GGTCTTCTTCCTGGTG
	GCTCTGGGCCCGGCCGGTCTCGG
15	GCGTCTCGTGTTCG
	CTCTTGTGCTGTTCCGGCCG
•	CTCCTTCCTCTTCCGCCGCC
	GCCGCTCCCCGCCC
20	GCTCGTCGCCCTGGCCC
	GGCCTCCTCCTGGCCGC
	TGTCTCGGGCGGCGCCTTGGC
	GCTCCGTTTGGGGCTG
	CCTCTGGCGCTTCC
25	GGCCCTCGGCCTGGGCGCTC
	TCTTCCGCCTGTGC
	TGGTGGCCCTCGTGG
	GCCCCTCCTGGCCTCCGGTGTCC
•	TGTGGTCCCCCGGCTGGT

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		GGCCGGGCCGGTTGGGCGGGC
		GTGGGCGCGGGGTCCTCC
		GGGCTGCCCTTCTCC
5		GCCGGGGTCCCGC
5		GCTCCTGCTGTTCCCTGGGCTCTTCTGCC
		TCTCTCCTGGGTGGGTGCCG
10		GGGTCTCCGGGCTTG
		CCCCGCGCTGCTGGGCGTTCTGC
15		GGTCTTGGGGTTGTC
10		TGTGGCCCGCTCG
		TGTCGCCCTCCGTCGCC
20		CGTCGCCGGCCTCGTCC
		CCTCCTGGGTGCGC
25		GGCGGGCTGGTCCT
23		GGCGTTTTGCTCCTTGG
	Inducible	nitric oxide synthase 5'-CTGCCCCBGTTTTTGBTCCTCBCBTGCCGTGGGGBGGB CBBTGGGGTTGCBTCCBGCTTGBCCBGBGBTTCTGGBG
30		BCTTCTTTCCCGTCTCCBCGBGGGGCTGCGGGGBCTCB TTCTGCTGCTGCTGBGGTTGTGBTBCTGBGGTCBTCC
		TGTGTCBCTGGBGGTGGCBCBGGGGGCTTTCTC CBCBTTGTTGTTGBTGTCTTTTTCCCCBTTCBTTGCBT
35		BCTGGTGGBBTTTGGTCTTGBBCBGBBBTTTCCBBGGB CBGGCCBTCTCTBTGGCTTTBCBBBGCBGGTCBCTTBT
J.,		GTCBCTTBTCTGGBTTTGBGCTCBGBTGTTCTTCBCTG TGGGGCTTGCBGCTGCCTCCCCGGGGTB-3'

#### Human major basic protein:

GTTTCATCTT GGCTTTATCC (SEQ ID NO:44)

40 EXAMPLE 6

Turning now to Figure 3, two asthmatic rabbits were adminstered adenosine, and two rabbits were adminstered dAMP, at the indicated concentrations, by inhalation as described above in Example 3. The results (shown in Figure 3 as change in compliance) indicate that dAMP, a breakdown product of antisense

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oligodeoxynucleotides containing adenosine, is as potent in the induction of bronchoconstriction as adenosine in the hyperresponsive airways of asthmatic rabbits.

#### EXAMPLE 7

5 An aerosolized phosphorothioate antisense ODN consisting of 50% adenosine and 50% guanine plus cytosine in a random configuation was found to produce potent bronchoconstrictor effects in hyperreactive airways of asthmatic rabbits. 10 illustrated in Figure 4. The control molecule used in this study, a phosphorothicate 21-mer antisense ODN consisting of 50% guanine and 50% thymidine plus cytosine (des-adenosine ODN) produced no bronchoconstrictor or any other effect in these same animals.

In this study, bronchoconstrictor effects were measured as a percentage change in bronchial compliance. Each group consisted of two allergic rabbits, and data shown are for the period following the second of two daily administrations of 5 mg aerosolized ODN by nebulizer.

These results indicate that antisense oligonucleotides, even when modified to slow degradation, produce adenosine metabolites capable of potent bronchoconstriction when adminstered in asthmatic 25 airways.

The foregoing examples are illustrative of the present invention, and are not to be construed as limiting thereof. The invention is defined by the following claims, with equivalents of the claims to be included therein.

#### -45-

### SEQUENCE LISTING

- (1) GENERAL INFORMATION:
  - (i) APPLICANT: Nyce, Jonathan W.
  - (ii) TITLE OF INVENTION: Method of Treatment of Lung Diseases Using Antisense Oligonucleotides
  - (iii) NUMBER OF SEQUENCES: 44
  - (iv) CORRESPONDENCE ADDRESS:
    - (A) ADDRESSEE: Kenneth D. Sibley
    - (B) STREET: Post Office Drawer 34009
    - (C) CITY: Charlotte
    - (D) STATE: NC
    - (E) COUNTRY: USA
    - (F) ZIP: 28234
  - (v) COMPUTER READABLE FORM:
    - (A) MEDIUM TYPE: Floppy disk

    - (B) COMPUTER: IBM PC compatible (C) OPERATING SYSTEM: PC-DOS/MS-DOS
    - (D) SOFTWARE: PatentIn Release #1.0, Version #1.30
  - (vi) CURRENT APPLICATION DATA:
    - (A) APPLICATION NUMBER:
    - (B) FILING DATE:
    - (C) CLASSIFICATION:
  - (viii) ATTORNEY/AGENT INFORMATION:
    - (A) NAME: Sibley, Kenneth D.
    - (B) REGISTRATION NUMBER: 31,665
    - (C) REFERENCE/DOCKET NUMBER: 5218-32
    - (ix) TELECOMMUNICATION INFORMATION:
      - (A) TELEPHONE: (919) 881-3140 (B) TELEFAX: (919) 881-3175

      - (C) TELEX: 575102
- (2) INFORMATION FOR SEQ ID NO:1:
  - (i) SEQUENCE CHARACTERISTICS:
    - (A) LENGTH: 21 base pairs
    - (B) TYPE: nucleic acid
    - (C) STRANDEDNESS: single
    - (D) TOPOLOGY: linear
  - (ii) MOLECULE TYPE: DNA (genomic)
  - (xi) SEQUENCE DESCRIPTION: SEQ ID NO:1:

GATGGAGGGC GGCATGGCGG G

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(2)	INFORMATION FOR SEQ ID NO:2:	
	(i) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 21 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear	
	(ii) MOLECULE TYPE: DNA (genomic)	
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GTA	GCAGGCG GGGATGGGGG C	21
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	(ii) MOLECULE TYPE: DNA (genomic)	
	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:3:	
GTT	GTTGGGC ATCTTGCC	18
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	(ii) MOLECULE TYPE: DNA (genomic)	
	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:4:	
GTAC	CTTGCGG ATCTAGGC	18
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(ii) MOLECULE TYPE: DNA (genomic)

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	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:5:	
GTG	GGCCTAG CTCTCGCC	18
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	(ii) MOLECULE TYPE: DNA (genomic)	
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TGC	TTTTCTT TTCTGGGCCT C	21
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	(ii) MOLECULE TYPE: DNA (genomic)	
	() STOUTHOU DESCRIPTION, SEO ID MO.O.	
	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:8:	29
GGC	GCCGTGC CGCGTCTTGG TGGCGGCGG	23

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(2)	INFORMATION FOR SEQ ID NO:9:	
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ПТ	CCCCTGG GTCTTCC	17
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	(ii) MOLECULE TYPE: DNA (genomic)	
	( :) CECUENCE DECORDETION CEO ID NO 10	
	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:10:	
GCCT	TGTGTCT CTCCTCCT	18
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	(ii) MOLECULE TYPE: DNA (genomic)	
	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:11:	
GCC1	тттсств вттстстт	18
(2)	INFORMATION FOR SEQ ID NO:12:	
	(i) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 18 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear	

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	(ii) MOLECULE TYPE: DNA (genomic)	•
	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:12:	
GCCT	TGTGTCT GTCCTCCT	18
(2)	INFORMATION FOR SEQ ID NO:13:	
	(i) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 26 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear	
	(ii) MOLECULE TYPE: DNA (genomic)	
	() SEQUENCE DESCRIPTION, SEQ ID NO.12.	
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TCTO	CCCTTGG GCTCTGGCTC CTTCTC	26
(2)	INFORMATION FOR SEQ ID NO:14:	
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СТТ	GCTCCTG GGGGCCTCCT G	21
(2)	INFORMATION FOR SEQ ID NO:15:	
	<ul><li>(i) SEQUENCE CHARACTERISTICS:</li><li>(A) LENGTH: 21 base pairs</li><li>(B) TYPE: nucleic acid</li><li>(C) STRANDEDNESS: single</li><li>(D) TOPOLOGY: linear</li></ul>	

(ii) MOLECULE TYPE: DNA (genomic)

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	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:15:	•
CTT	GCTCCTG GGGGCCTCCT G	21
(2)	INFORMATION FOR SEQ ID NO:16:	
	(i) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 20 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOŁOGY: linear	
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	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:16:	
GGT(	GTGCGGG GCCTGGTGCC	20
(2)	INFORMATION FOR SEQ ID NO:17:	
	(i) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 19 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear	
	(ii) MOLECULE TYPE: DNA (genomic)	
	<pre>(ix) FEATURE:     (A) NAME/KEY: misc_feature     (B) LOCATION: 12     (D) OTHER INFORMATION: /standard_name= "Reduced A"</pre>	
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	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:17:	
GGG	CGCGGGC GAGCATCGC	19
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	(ii) MOLECULE TYPE: DNA (genomic)	

(xi) SEQUENCE DESCRIPTION: SEQ ID NO:18:	
CCTCCTTCCT GGTCTGTCTG C	21
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(i) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 20 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear	
(ii) MOLECULE TYPE: DNA (genomic)	
(xi) SEQUENCE DESCRIPTION: SEQ ID NO:19:	
GCCCTGCTGC TCTTTCTGCT	20
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(ii) MOLECULE TYPE: DNA (genomic)	
(xi) SEQUENCE DESCRIPTION: SEQ ID NO:20:	
GCGCTCGGCC TGGTCCCGG	19
(2) INFORMATION FOR SEQ ID NO:21:	
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GCGCGGGCCG GGGGCTGCTG GG	` 22

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(2)	INFORMATION FOR SEQ ID NO:22:	
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	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:22:	
CCTC	TTTTCT GTTTTTCCC	19
(2)	INFORMATION FOR SEQ ID NO:23:	
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	(ii) MOLECULE TYPE: DNA (genomic)	
	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:23:	
OTTO		19
	CTTGGCT TCTTCTGTC	13
(2)	INFORMATION FOR SEQ ID NO:24:	
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	(ii) MOLECULE TYPE: DNA (genomic)	
	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:24:	
CTC	TGCTGGT TTTCTGCCTT CTGCCC	26
(2)	INFORMATION FOR SEQ ID NO:25:	
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(ii) MOLECULE	TYPE:	DNA	(genomic	)
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(ii) MOLECULE TYPE: DNA (genomic)

	(11) MOLECULE TIPE: DIVA (GENOMITC)	
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ПП	CTCTTT CGCTTTCTTT TCGTCTCCTG TTCCTCCTTT T	41
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	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:26:	
СТСТ	GTCTTG TTCTGGTCCT TCGTGGGGCT CTG	33
(2)	INFORMATION FOR SEQ ID NO:27:	
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	(xi) SEQUENCE DESCRIPTION: SEQ ID NO:27:	
CTC	TGGTTGG CTTCCTTC	18
(2)	INFORMATION FOR SEQ ID NO:28:	
	(i) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 18 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear	

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(xi) SEQUENCE DESCRIPTION: SEQ ID NO:28:	
TCCCTGTTTC CCCCCTTT	18
(2) INFORMATION FOR SEQ ID NO:29:	
<ul> <li>(i) SEQUENCE CHARACTERISTICS:</li> <li>(A) LENGTH: 27 base pairs</li> <li>(B) TYPE: nucleic acid</li> <li>(C) STRANDEDNESS: single</li> <li>(D) TOPOLOGY: linear</li> </ul>	
(ii) MOLECULE TYPE: DNA (genomic)	
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GCTTCTCTTT CGTTCCCGGT GGGCTCG	27
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GCTTGTGTGC TCTGCTGTCT CT	22
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TGGTGGGGCT GGGGCTCCGG GGTCTCTGCC CCTCCGTGC	39
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<ul><li>(i) SEQUENCE CHARACTERISTICS:</li><li>(A) LENGTH: 19 base pairs</li><li>(B) TYPE: nucleic acid</li><li>(C) STRANDEDNESS: single</li><li>(D) TOPOLOGY: linear</li></ul>	
(ii) MOLECULE TYPE: DNA (genomic)	
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GTGGGGCCTG CTCTCCCGGC CTCCG	25
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(ii) MOLECULE TYPE: DNA (genomic)	
(xi) SEQUENCE DESCRIPTION: SEQ ID NO:34:	
GGGTCCTCAT GGCTGGGG	18
(2) INFORMATION FOR SEQ ID NO:35:	
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(ii) MOLECULE TYPE: DNA (genomic)	

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<pre>(ix) FEATURE:     (A) NAME/KEY: misc_feature     (B) LOCATION: 9     (D) OTHER INFORMATION: /standard_name= "Reduced A"</pre>	
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(2) INFORMATION FOR SEQ ID NO:38:

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(i) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 24 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear	
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GGGGTGGGTA GGCCGTGTCT GGGG	24
(2) INFORMATION FOR SEQ ID NO:39:	
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CGGTTTCCTT TGCGGTC	17
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(2) INFORMATION FOR SEQ ID NO:41:	
<ul> <li>(i) SEQUENCE CHARACTERISTICS:</li> <li>(A) LENGTH: 20 base pairs</li> <li>(B) TYPE: nucleic acid</li> <li>(C) STRANDEDNESS: single</li> <li>(D) TOPOLOGY: linear</li> </ul>	

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1	(ii)	MOLECULE TYPE: DNA (genomic)	•
	(ix)	<pre>FEATURE:   (A) NAME/KEY: misc_feature   (B) LOCATION: 6   (D) OTHER INFORMATION: /standard_name= "Reduced A"</pre>	
	(ix)	FEATURE: (A) NAME/KEY: misc_feature (B) LOCATION: 10 (D) OTHER INFORMATION: /standard_name= "Reduced A"	
	(xi)	SEQUENCE DESCRIPTION: SEQ ID NO:41:	
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(2)	INFO	RMATION FOR SEQ ID NO:42:	
	(i)	SEQUENCE CHARACTERISTICS:  (A) LENGTH: 24 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear	
	(ii)	MOLECULE TYPE: DNA (genomic)	
	(xi)	SEQUENCE DESCRIPTION: SEQ ID NO:42:	
GCT	GTCC	CTC TGCTGTCCTT GCTG	24
(2)	INFO	DRMATION FOR SEQ ID NO:43:	
	(i)	SEQUENCE CHARACTERISTICS:  (A) LENGTH: 25 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear	
	(ii)	) MOLECULE TYPE: DNA (genomic)	
	(xi	) SEQUENCE DESCRIPTION: SEQ ID NO:43:	
GCC	CCGT	CTG CTGCTCCTCG TGCCG	25
(2)	INF	ORMATION FOR SEQ ID NO:44:	
	(i	) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 20 base pairs  (B) TYPE: nucleic acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear	

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-59-

- (ii) MOLECULE TYPE: DNA (genomic)
- (ix) FEATURE:
   (A) NAME/KEY: misc\_feature
   (B) LOCATION: 6
   (D) OTHER INFORMATION: /standard\_name= "Reduced A"
- (ix) FEATURE:
   (A) NAME/KEY: misc\_feature
   (B) LOCATION: 17
   (D) OTHER INFORMATION: /standard\_name= "Reduced A"
- (xi) SEQUENCE DESCRIPTION: SEQ ID NO:44:

GTTTCATCTT GGCTTTATCC

20

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#### THAT WHICH IS CLAIMED IS:

1. A method of treating airway disease in a subject in need of such treatment, comprising:

topically administering an antisense oligonucleotide to the airway epithelium of said subject in an amount effective to treat said disease;

said antisense oligonucleotide being
essentially free of adenosine.

- A method according to claim 1 wherein said airway disease is a lung disease and said airway
   epithelium is a lung airway epithelium.
- 3. A method according to claim 1 wherein said antisense oligonucleotide comprises nucleotides in which at least one phosphodiester linkage is replaced with a linkage selected from the group consisting of methylphosphonate linkages, phosphotriester linkages, phosphorothioate linkages, and phosphoramidate linkages.
- 4. A method according to claim 1 wherein said airway disease is selected from the group consisting of cystic fibrosis, asthma, chronic obstructive pulmonary disease, bronchitis, and other airway diseases characterized by an inflammatory response.
- A method according to claim 1 wherein said 5. antisense oligonucleotide is targeted against an mRNA 25 encoding a protein selected from the group consisting of human A2a adenosine receptor, human A2b adenosine receptor, human IgE receptor  $\beta$ , human Fc-epsilon receptor CD23 antigen, human histidine decarboxylase, human beta human prostaglandin D human tryptase-I, tryptase, cyclooxygenase-2, human 30 synthase, human cationic protein, human eosinophil derived neurotoxin, human eosinophil peroxidase, human intercellular adhesion

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(ICAM-1), human vascular cell adhesion molecule-1 molecule 1 (VCAM-1), human endothelial leukocyte adhesion molecule (ELAM-1), human P selectin, human endothelial monocyte activating factor, human IL-3, human IL-4, human 5 IL-5, human IL-6, human IL-8, human monocyte-derived neutrophil chemotactic factor, human neutrophil elastase, human neutrophil oxidase factor, human cathepsin G, human defensin 1, human defensin 3, human macrophage protein-1-alpha, human muscarinic inflammatory 10 acetylcholine receptor HM1, human acetylcholine receptor HM3, human fibronectin, human GM-CSF, human tumor necrosis factor \alpha, human leukotriene C4 synthase, human major basic protein, and endothelin 1.

- 6. A method according to claim 1 wherein said antisense oligonucleotide is delivered by administering an aerosol of respirable particles containing said antisense oligonucleotide to the lungs of said subject.
- A method according to claim 6, wherein said particles are selected from the group consisting of
   solid particles and liquid particles.
  - 8. A method according to claim 6, wherein said aerosol is comprised of particles having a particle size within the range of about 0.5 to 10 microns.
- A method according to claim 8 wherein said
   particles are liposomes containing said antisense oligonucleotide.
- 10. A method according to claim 6 wherein said antisense oligonucleotide is administered in amount sufficient to achieve intracellular concentrations of said antisense oligonucleotide in said subject from about 0.1 to 10  $\mu$ M.

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• 11. A pharmaceutical composition, comprising, together in a pharmaceutically acceptable carrier:

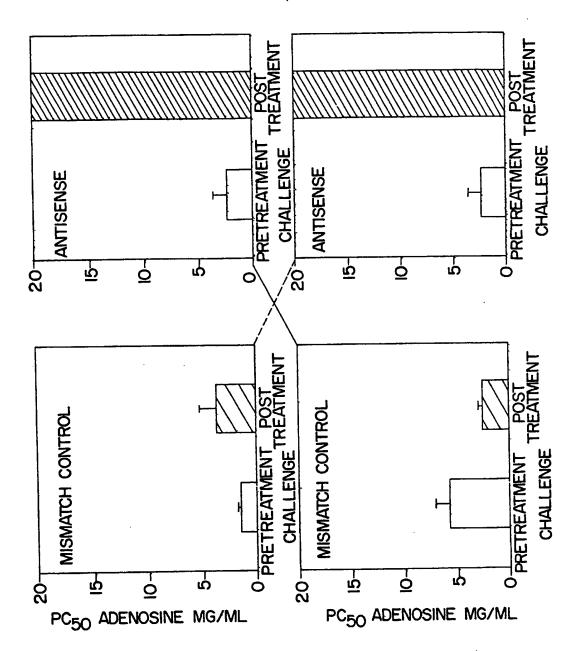
an antisense oligonucleotide in an amount effective to treat an airway disease;

5 said antisense oligonucleotide being essentially free of adenosine.

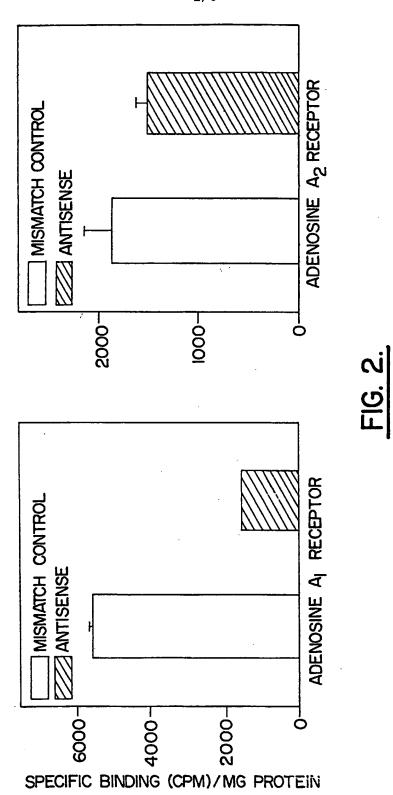
- 12. A pharmaceutical composition according to claim 11 wherein said airway disease is a lung disease and said airway epithelium is a lung airway epithelium.
- 13. A pharmaceutical composition according to claim 11 wherein said antisense oligonucleotide comprises nucleotides in which at least one phosphodiester linkage is replaced with a linkage selected from the group consisting of methylphosphonate linkages, phosphorotiester linkages, phosphorothicate linkages, phosphorodithicate linkages, and phosphoramidate linkages.
  - 14. A pharmaceutical composition according to claim 11 wherein said airway disease is cystic fibrosis.
- A pharmaceutical composition according to 15. 20 claim 11 wherein said antisense oligonucleotide is targeted against an mRNA encoding a protein selected from the group consisting of human A2a adenosine receptor, human A2b adenosine receptor, human IgE receptor  $\beta$ , human Fc-epsilon receptor CD23 antigen, human histidine 25 decarboxylase, human beta tryptase, human tryptase-I, human prostaglandin D synthase, human cyclooxygenase-2, human eosinophil cationic protein, human eosinophil derived neurotoxin, human eosinophil peroxidase, human intercellular adhesion molecule-1 (ICAM-1), human 30 vascular cell adhesion molecule 1 (VCAM-1), endothelial leukocyte adhesion molecule (ELAM-1), human P selectin, human endothelial monocyte activating factor, human IL-3, human IL-4, human IL-5, human IL-6, human IL-

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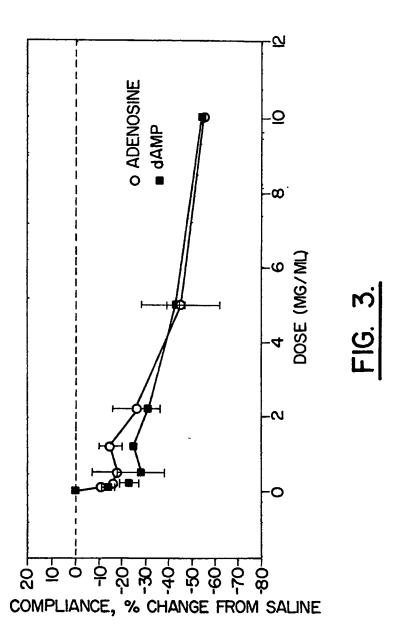
- 8, human monocyte-derived neutrophil chemotactic factor, human neutrophil elastase, human neutrophil oxidase factor, human cathepsin G, human defensin 1, human defensin 3, human macrophage inflammatory protein-1-alpha, human muscarinic acetylcholine receptor HM1, human muscarinic acetylcholine receptor HM3, human fibronectin, human GM-CSF, human tumor necrosis factor α, human leukotriene C4 synthase, and human major basic protein.
- 16. A pharmaceutical composition according to 10 claim 11 wherein said antisense oligonucleotide is delivered by administering an aerosol of respirable particles containing said antisense oligonucleotide to the lungs of said subject.
- 17. A pharmaceutical composition according to claim 16, wherein said particles are selected from the group consisting of solid particles and liquid particles.
- 18. A pharmaceutical composition according to claim 16, wherein said aerosol is comprised of particles having a particle size within the range of about 0.5 to 20 10 microns.
  - 19. A pharmaceutical composition according to claim 16 wherein said particles are liposomes containing said antisense oligonucleotide.
- 20. A pharmaceutical composition according to claim 11 wherein said antisense oligonucleotide is administered in amount sufficient to achieve intracellular concentrations of said antisense oligonucleotide in said subject from about 0.1 to 10  $\mu$ M.
- 21. A pharmaceutical composition according to 30 claim 11, wherein said antisense oligonucleotide is conjugated to a molecule capable of cellular uptake.



F1G. 1.



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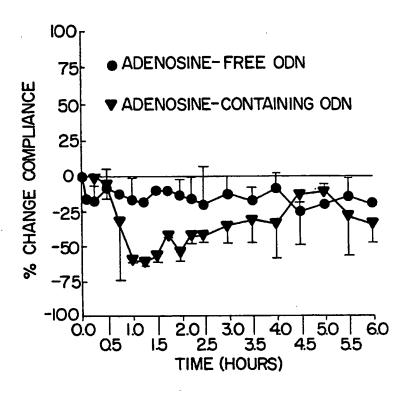


FIG. 4.

## INTERNATIONAL SEARCH REPORT

Form PCT/ISA/210 (second sheet)(July 1992)\*

International application No. PCT/US96/09306

A. CLASSIFICATION OF SUBJECT MATTER  IPC(6) :A61K 31/70  US CL :514/44: 536/23,1			
According to International Patent Classification (IPC) or to both	national classification and IPC		
B. FIELDS SEARCHED			
Minimum documentation searched (classification system followed	d by classification symbols)		
U.S. : 514/44; 536/23.1			
Documentation searched other than minimum documentation to the	e extent that such documents are included	in the fields searched	
Electronic data base consulted during the international search (na	ame of data base and, where practicable	, search terms used)	
Please See Extra Sheet.			
C. DOCUMENTS CONSIDERED TO BE RELEVANT			
Category* Citation of document, with indication, where ap	propriate, of the relevant passages	Relevant to claim No.	
X US 5,514,788 A (BENNETT III) (07.05.93), see entire document, e	specially Abstract, column	1-6, 11-13, 15, 16	
3, lines 15-18, column 5, lines 21 and 3.	3, lines 15-18, column 5, lines 21-29, column 9, Figures 2 and 3.		
(03.02.94), see entire document,	WO 94/02605 A1 (DUKE UNIVERSITY) 03 February 1994 1- (03.02.94), see entire document, especially page 5, lines 9- 14		
Y   15, page 18, line 28, page 20, lines 2-5 .	15, page 18, line 28, page 20, lines 2-5, 11-15 and 31, page 21, lines 2-5.		
Y US 5,264,618 A (FELGNER ET (23.11.93), see entire document, 40-42 and 54-56, column 8, lines 12-15.	especially column 7, lines	7-10, 17-20	
X Further documents are listed in the continuation of Box C	. See patent family annex.		
Special categories of cited documents:	*T* later document published after the int	ernational filing date or priority	
"A" document defining the general state of the art which is not considered to be of particular relevance	date and not in conflict with the applic principle or theory underlying the inv	ation but cited to understand the	
*E* earlier document published on or after the international filing date	*X* document of particular relevance; the considered novel or cannot be considered.	e claimed invention cannot be red to involve an inventive step	
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*O* document referring to an oral disclosure, use, exhibition or other means	considered to involve an inventive combined with one or more other suc being obvious to a person skilled in t	step when the document is h documents, such combination	
*P* document published prior to the international filing date but later than *&* document member of the same patent family the priority date claimed			
Date of the actual completion of the international search  Date of mailing of the international search report			
18 AUGUST 1996 03 SEP 1996			
Name and mailing address of the ISA/US  Authorized officer			
Commissioner of Patents and Trademarks Box PCT Washington, D.C. 20231	NANCY AXELROD // (L.)	<b>かて /</b>	
Facsimile No. (703) 305-3230	Telephone No. (703) 308-0196	(YF~	

## INTERNATIONAL SEARCH REPORT

International application No.
PCT/US96/09306

		PC1/0390/0930		
C (Continua	tion). DOCUMENTS CONSIDERED TO BE RELEVANT			
Category*	KNIGHT, V et al. Antiviral therapy with small particle aerosols. European Journal of Clinical Microbiology and Infectious Diseases. December 1988, Vol. 7, No. 6, pages 721-731, Abstract only.  SCHREIER, H. The new frontier: gene and oligonucleotide therapy. Pharmaceutica Acta Helvetiae. January 1994, Vol. 68, No. 3, pages 145-159, Abstract only.  US 5,521,291 A (CURIEL ET AL.) 15 December 1993 (15.12.93), see entire document, especially column 13, lines 49-54, column 25, lines 17-19, 46-50, 50-62.		Relevant to claim No	
Y			7-10, 17-20	
Y			14	
Y			21	
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# INTERNATIONAL SEARCH REPORT

International application No. PCT/US96/09306

B. FIELDS SEARCHED  Electronic data bases consulted (Name of data base and where practicable terms used):					
Medline, Biosis, Biotechds, Caplus, CJACS, Embase, Toxlit Terms: (antisense or anti-sense); therap?; (lung disease or asthma or airway disease or bronchial?); adenosine; (cystic fibrosis or CF); liposome; (micron# or microm?); aerosol; Nyce J?/au; Metzger, w J?/au					